Case 24-11552-SLM Doc 1 Filed 02/20/24 Entered 02/20/24 09:20:33 Desc Main Document Page 1 of 61

Fill in this information to identify your case:	
United States Bankruptcy Court for the:	
District of New Jersey	
Case number (If known):	Chapter you are filing under:
	Chapter 11
	☐ Chapter 12 ☑ Chapter 13

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/22

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be *yes* if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	Part 1: Identify Yourself						
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):				
1.	Your full name						
	Write the name that is on your government-issued picture identification (for example,	Charles First name J.	First name				
	your driver's license or passport).	Middle name	Middle name				
	Bring your picture identification to your meeting with the trustee.		Last name				
		Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)				
2.	All other names you have used in the last 8 years	Charles Uvino					
	Include your married or maiden names and any assumed, trade names and doing business as names.						
	Do NOT list the name of any separate legal entity such as a corporation, partnership, or LLC that is not filling this petition.						
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx - xx - <u>7</u> <u>1</u> <u>3</u> <u>5</u> OR 9 xx - xx	xxx - xx OR 9 xx - xx				

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Debtor 1 Charles J. Uvino

Onanoo 0. 0 m	
First Name	Middle Name

Last Name

	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4. Your Employer Identification Number (EIN), if any.	EIN	EIN
	EIN	EIN
	EIN	EIN
5. Where you live		If Debtor 2 lives at a different address:
	47 Morris Avenue Number Street	Number Street
	West Milford NJ 07480 City State ZIP Code Passaic County	City State ZIP Code
	If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	County If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
	Number Street P.O. Box	Number Street P.O. Box
	City State ZIP Code	City State ZIP Code
6. Why you are choosing this district to file for bankruptcy	Check one: ✓ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)

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Debtor 1 Charles J. Uvino

First Name Middle Name

Last Name

Pa	art 2: Tell the Court Ab	out Your Bankı	ruptcy Case				
7.	The chapter of the Bankruptcy Code you are choosing to file under		<i>y</i> (Form 2010)). Also, go 7 11 12			S.C. § 342(b) for Individuals Filing appropriate box.	
8.	How you will pay the fee	local cou yourself, submittin with a pri I need to Applicati I reques By law, a less than pay the f	 ✓ I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. ☐ I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A). ☐ I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. 				
	Have you filed for bankruptcy within the last 8 years?	District			When	Case number Case number Case number	
10.	affiliate? Di	ebtorebtor		When _	Rela	elationship to you Case number, if known ationship to you Case number, if known	
11.	Do you rent your residence?	Yes. Has	to line 12. s your landlord obtained a No. Go to line 12. Yes. Fill out <i>Initial Statei</i> this bankruptcy petition.			gainst You (Form 101A) and file it w	ith

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Charles J. Uvino Debtor 1

First Name

Middle Name Last Name

Part 3: Report About Any B	Businesses You Own as a Sole Proprietor			
12. Are you a sole proprietor of any full- or part-time business? No. Go to Part 4. Yes. Name and location of business				
A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.	Name of business, if any Number Street			
If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.	City State ZIP Code			
	Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above			
13. Are you filing under Chapter 11 of the Bankruptcy Code and are you a <i>small business debtor</i> or a debtor as defined by 11 U.S. C. § 1182(1)? For a definition of <i>small business debtor</i> , see 11 U.S.C. § 101(51D).	If you are filing under Chapter 11, the court must know whether you are a small business debtor or a debtor choosing to proceed under Subchapter V so that it can set appropriate deadlines. If you indicate that you are a small business debtor or you are choosing to proceed under Subchapter V, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B). No. I am not filing under Chapter 11. No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code. Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code, and I do not choose to proceed under Subchapter V of Chapter 11. Yes. I am filing under Chapter 11, I am a debtor according to the definition in § 1182(1) of the Bankruptcy Code, and I choose to proceed under Subchapter V of Chapter 11.			
Part 4: Report if You Own 14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention? For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?	read or Have Any Hazardous Property or Any Property That Needs Immediate Attention ✓ No — Yes. What is the hazard? If immediate attention is needed, why is it needed? Where is the property?			

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Debtor 1 Charles J. Uvino

First Name Middle Name Last Name

Case number (if known)_

D	

Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

	About Debtor 1:			About Debtor 2 (Sp	oouse Only in a Joint Case):	
	You must check one):		You must check one	e:	
	✓ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.			counseling age	efing from an approved credit ency within the 180 days before I uptcy petition, and I received a empletion.	
		the certificate and the payment you developed with the agency.			the certificate and the payment you developed with the agency.	
	counseling age	iefing from an approved credit ency within the 180 days before I ruptcy petition, but I do not have a		counseling age	efing from an approved credit ency within the 180 days before I uptcy petition, but I do not have a empletion.	
		fter you file this bankruptcy petition, copy of the certificate and payment			after you file this bankruptcy petition, copy of the certificate and payment	
I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.				I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.		
	To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.			To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.		
	Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.			Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.		
If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.						
		the 30-day deadline is granted nd is limited to a maximum of 15		Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.		
	I am not require credit counseling	ed to receive a briefing abouting because of:		I am not require credit counseli	ed to receive a briefing about ng because of:	
	☐ Incapacity.	I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.		☐ Incapacity.	I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.	
	Disability.	My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.		Disability.	My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.	
	Active duty.	I am currently on active military duty in a military combat zone.		Active duty	. I am currently on active military duty in a military combat zone.	
	briefing about cre	u are not required to receive a edit counseling, you must file a r of credit counseling with the court.		briefing about cr	ou are not required to receive a edit counseling, you must file a er of credit counseling with the court.	

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Charles J. Uvino Debtor 1

Onai	103	Ο.	U	v 11	
First	Nam	е			

Middle Name Last Name

Pa	rt 6: Answer These Ques	stions for Reporting Purposes	i			
16.	What kind of debts do you have?	16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." ☐ No. Go to line 16b. ✔ Yes. Go to line 17.				
		 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17. 				
		16c. State the type of debts you ov	we that are not consumer de	ebts or business de	ebts.	
17.	Are you filing under Chapter 7?	✓ No. I am not filing under Chap	oter 7. Go to line 18.			
	Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	is administrative expenses are paid that funds will be available to distribute to unsecured cr No Ses Yes tion				
18.	How many creditors do you estimate that you owe?	✓ 1-49 ☐ 50-99 ☐ 100-199 ☐ 200-999	1,000-5,000 5,001-10,000 10,001-25,000		25,001-50,000 50,001-100,000 More than 100,000	
19.	How much do you estimate your assets to be worth?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$1,000,001-\$10 millio \$10,000,001-\$50 millio \$50,000,001-\$100 mi \$100,000,001-\$500 n	ion [\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion	
20.	How much do you estimate your liabilities to be?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$1,000,001-\$10 millio \$10,000,001-\$50 millio \$50,000,001-\$100 mi \$100,000,001-\$500 n	ion	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion	
Pa	rt 7: Sign Below					
Fo	r you	I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13				
		of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.				
		If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).				
		I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.				
		I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.				
		/s/ Charles J. Uvino	>	¢		
		Signature of Debtor 1		Signature of Deb	tor 2	
		Executed on	YY -	Executed on	/ DD /YYYY	

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For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Jamal Romero	Date	02/20/2024		
Signature of Attorney for Debtor		MM / DD /YYYY		
Jamal Romero				
Printed name				
Scura Wigfield, Heyer, Stevens &	& Cammarota LLP			
Firm name				
1599 Hamburg Turnpike				
Number Street				
Wayne	NJ	07470		
City	State	ZIP Code		
Contact phone 973-696-8391	Email address jrome	ero@scura.com		
, -				
231232020	NJ			
Bar number	State	_		
231232020 Bar number		_		

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Fill in this information to identify your case:						
Charles J. Uvino						
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse, if filing)	First Name	Middle Name	Last Name			
United States Bankruptcy Court for the: District of New Jersey						
Case number	(If known)					

Check if this is an
amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information 12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

	Your assets Value of what you own
Schedule A/B: Property (Official Form 106A/B)	\$467,333.00
1a. Copy line 55, Total real estate, from Schedule A/B	\$407,333.00
1b. Copy line 62, Total personal property, from Schedule A/B	\$26,091.38
1c. Copy line 63, Total of all property on Schedule A/B	\$ <u>493,424.38</u>
art 2: Summarize Your Liabilities	
	Your liabilities Amount you owe
Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$381,712.22
Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$29,742.00
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	+ \$93,077.22
Your total liabilities	\$ <u>504,531.44</u>
Part 3: Summarize Your Income and Expenses	
. Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$ <u>8,367.40</u>
. Schedule J: Your Expenses (Official Form 106J)	
Copy your monthly expenses from line 22c of Schedule J	\$ <u>7,664.22</u>

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Charles Uvino

Debtor 1

First Name Middle Name Last Name

Pa	art 4: Answer These Questions for Administrative and Statistical Records	
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?	
	No. You have nothing to report on this part of the form. Check this box and submit this form.✓ Yes	orm to the court with your other schedules.
7.	What kind of debt do you have?	
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purpose.	
	Your debts are not primarily consumer debts. You have nothing to report on this part this form to the court with your other schedules.	t of the form. Check this box and submit
8.	From the Statement of Your Current Monthly Income: Copy your total current monthly in Form 122A-1 Line 11; OR , Form 122B Line 11; OR , Form 122C-1 Line 14.	scome from Official \$16,923.02
9.	Copy the following special categories of claims from Part 4, line 6 of <i>Schedule E/F</i> :	
		Total claim
	From Part 4 on Schedule E/F, copy the following:	
	9a. Domestic support obligations (Copy line 6a.)	\$
	9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$
	9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$
	9d. Student loans. (Copy line 6f.)	\$
	9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$
	9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+ \$
	9g. Total. Add lines 9a through 9f.	\$

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Charles J. Uvino		
btor 1 Charles 5. Ovino		
First Name Middle Name	Last Name	
btor 2 bouse, if filing) First Name Middle Name	Last Name	
ited States Bankruptcy Court for the: District or rsey	f New	
iscy		☐ Check if this
se number		an amended
know)		filing
(C) : 1 = 4004/D		
fficial Form 106A/B		
chedule A/B: Prop	ertv	12/1
sponsible for supplying correct information ite your name and case number (if known	complete and accurate as possible. If two married per on. If more space is needed, attach a separate sheet to). Answer every question. ilding, Land, or Other Real Estate You Own or	o this form. On the top of any additional pag
_ ′ ′ ′ ′	le interest in any residence, building, land, or similar	property?
No. Go to Part 2		
Yes. Where is the property?		
	What is the property? Check all that apply	
1.1 47 Morris Avenue	Cinale family have	Do not deduct secured claims or exemptions. Put amount of any secured claims on <i>Schedule D</i> :
Street address, if available, or other description	Duplex or multi-unit building	Creditors Who Have Claims Secured by Property
-	Condominium or cooperative	Current value of the Current value of t
West Milford NJ 07480	☐ Manufactured or mobile home	entire property? portion you own?
	Land	\$ <u>467,333.00</u>
City State ZIP Code	Investment property	Describe the nature of your ownership
	Timeshare	interest (such as fee simple, tenancy by the
Passaic County	Other	entireties, or a life estate), if known.
County	Who has an interest in the property? Check one	Tenancy by the Entireties
	Debtor 1 only	☐ Check if this is community property
	Debtor 2 only	Greek if this is community property
	Debtor 1 and Debtor 2 only	
	· ·	
	At least one of the debtors and another	
	At least one of the debtors and another Other information you wish to add about this property identification number:	item, such as local
	Other information you wish to add about this	9.70 - \$362,247.22 = \$58,352.48 /2 =
Add the dollar value of the portion you over	Other information you wish to add about this property identification number: \$467,333.00 (Value) - \$46,733.30 = \$420,59 \$29,176.24 - \$27,900.00 (Exemption) = \$1,2	9.70 - \$362,247.22 = \$58,352.48 /2 = 76.24 (Non-Exempt Equity)
	Other information you wish to add about this property identification number: \$467,333.00 (Value) - \$46,733.30 = \$420,59	9.70 - \$362,247.22 = \$58,352.48 /2 = 76.24 (Non-Exempt Equity)
	Other information you wish to add about this property identification number: \$467,333.00 (Value) - \$46,733.30 = \$420,59 \$29,176.24 - \$27,900.00 (Exemption) = \$1,2	9.70 - \$362,247.22 = \$58,352.48 /2 = 76.24 (Non-Exempt Equity)
you have attached for Part 1. Write that n	Other information you wish to add about this property identification number: \$467,333.00 (Value) - \$46,733.30 = \$420,59 \$29,176.24 - \$27,900.00 (Exemption) = \$1,2	9.70 - \$362,247.22 = \$58,352.48 /2 = 76.24 (Non-Exempt Equity)
rt 2: Describe Your Vehicles you own, lease, or have legal or equitable	Other information you wish to add about this property identification number: \$467,333.00 (Value) - \$46,733.30 = \$420,59 \$29,176.24 - \$27,900.00 (Exemption) = \$1,2	9.70 - \$362,247.22 = \$58,352.48 /2 = 76.24 (Non-Exempt Equity) es for pages 4 or not? Include any vehicles
rt 2: Describe Your Vehicles you own, lease, or have legal or equitable own that someone else drives. If you lea	Other information you wish to add about this property identification number: \$467,333.00 (Value) - \$46,733.30 = \$420,59 \$29,176.24 - \$27,900.00 (Exemption) = \$1,2 on for all of your entries from Part 1, including any entrieumber here	9.70 - \$362,247.22 = \$58,352.48 /2 = 76.24 (Non-Exempt Equity) es for pages 4 or not? Include any vehicles
rt 2: Describe Your Vehicles you own, lease, or have legal or equitable own that someone else drives. If you lea . Cars, vans, trucks, tractors, sport utility	Other information you wish to add about this property identification number: \$467,333.00 (Value) - \$46,733.30 = \$420,59 \$29,176.24 - \$27,900.00 (Exemption) = \$1,2 on for all of your entries from Part 1, including any entrieumber here	9.70 - \$362,247.22 = \$58,352.48 /2 = 76.24 (Non-Exempt Equity) es for pages 4 or not? Include any vehicles
rt 2: Describe Your Vehicles you own, lease, or have legal or equitable own that someone else drives. If you lea Cars, vans, trucks, tractors, sport utility	Other information you wish to add about this property identification number: \$467,333.00 (Value) - \$46,733.30 = \$420,59 \$29,176.24 - \$27,900.00 (Exemption) = \$1,2 on for all of your entries from Part 1, including any entrieumber here	9.70 - \$362,247.22 = \$58,352.48 /2 = 76.24 (Non-Exempt Equity) es for pages 4 or not? Include any vehicles
rt 2: Describe Your Vehicles you own, lease, or have legal or equitable own that someone else drives. If you lea . Cars, vans, trucks, tractors, sport utility	Other information you wish to add about this property identification number: \$467,333.00 (Value) - \$46,733.30 = \$420,59 \$29,176.24 - \$27,900.00 (Exemption) = \$1,2 on for all of your entries from Part 1, including any entrieumber here	9.70 - \$362,247.22 = \$58,352.48 /2 = 76.24 (Non-Exempt Equity) es for pages 4 or not? Include any vehicles
you have attached for Part 1. Write that not the second of	Other information you wish to add about this property identification number: \$467,333.00 (Value) - \$46,733.30 = \$420,59 \$29,176.24 - \$27,900.00 (Exemption) = \$1,2 on for all of your entries from Part 1, including any entrieumber here	9.70 - \$362,247.22 = \$58,352.48 /2 = 76.24 (Non-Exempt Equity) es for pages 4 or not? Include any vehicles

Filed 02/20/24 Entered 02/20/24 09:20:33 Case 24-11552-SLM Doc 1 Desc Main Page 11 of 61 Charles J. Uvino Document Case number(if known) Who has an interest in the property? Check 3.1 Make:RAM Do not deduct secured claims or exemptions. Put the Model:1500 Crew amount of any secured claims on Schedule D: Debtor 1 only Creditors Who Have Claims Secured by Property: Year: 2018 Debtor 2 only Current value of the Current value of the Approximate mileage: Debtor 1 and Debtor 2 only entire property? portion you own? Other information: At least one of the debtors and another he

	Condition:	Check if this is community property (see instructions)	\$ <u>22,673.00</u>
4.		ATVs and other recreational vehicles, other vehicles, and accessories rsonal watercraft, fishing vessels, snowmobiles, motorcycle accessories	
5.	Add the dollar value of the portion you have attached for Part 2. Write th	ou own for all of your entries from Part 2, including any entries for pages lat number here	\$22,673.00
Par	1: 3: Describe Your Personal a	nd Household Items	
Do	you own or have any legal or equita	ble interest in any of the following?	Current value of the portion you own?
6.	Household goods and furnishings		Do not deduct secured claims or exemptions.
	Examples: Major appliances, furniture	e, linens, china, kitchenware	ciains of exemptions.
	No		
	Yes. Describe		1
7	Household items Electronics		\$ <u>1,200.00</u>
	Examples: Televisions and radios; au	dio, video, stereo, and digital equipment; computers, printers, scanners; music ces including cell phones, cameras, media players, games	
	No✓ Yes. Describe		
	Cellphone, TVs		\$ <u>750.00</u>
8.	Collectibles of value		
	stamp, coin, or baseball ca	intings, prints, or other artwork; books, pictures, or other art objects; ard collections; other collections, memorabilia, collectibles	
	✓ No ☐ Yes. Describe		
9.	Equipment for sports and hobbies		
	and kayaks; carpentry tool	rcise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes ls; musical instruments	
	✓ No ☐ Yes. Describe		
10	O. Firearms		
	Examples: Pistols, rifles, shotguns, ar	mmunition, and related equipment	
	✓ No ☐ Yes. Describe		
11	1. Clothes		
	Examples: Everyday clothes, furs, lea	ather coats, designer wear, shoes, accessories	
	No✓ Yes. Describe		
	Clothes, Shoes & Accessories		\$ <u>630.00</u>
12	2. Jewelry		
	gold, silver	e jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems	
	☐ No ☑ Yes. Describe		
	Wedding Band		\$ <u>150.00</u>

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Debtor 1

13.	Non-farm animals			
	Examples: Dogs, cats, birds, horses			
	✓ No			
	Yes. Describe			
14.	Any other personal and househol	d items you did not already list, including any health aids you did not list		
	☑ No			
	Yes. Give specific information			
15. /	Add the dollar value of the portion ye	ou own for all of your entries from Part 3, including any entries for pages		_
}	ou have attached for Part 3. Write th	nat number here	> \$2,730.00	2
				_
Part	4: Describe Your Financial A	ssets		
_			Current value of the	
Do y	ou own or have any legal or equita	ble interest in any of the following?	portion you own?	
			Do not deduct secured	
16.	Cash		claims or exemptions.	
		allet, in your home, in a safe deposit box, and on hand when you file your petition		
	No	, ,,,,		
	_		\$ 25.00	
17	Deposits of money		Ψ <u>23.00</u>	
11.	,	er financial accounts; certificates of deposit; shares in credit unions, brokerage houses		
		ns. If you have multiple accounts with the same institution, list each.		
	□ No			
	✓ Yes	Institution name:		
	17.1. Checking account:	TD Bank -7934	\$ <u>123.51</u>	
	17.2. Checking account:	TD Bank -0411 (Joint)	\$ <u>539.87</u>	
18.	Bonds, mutual funds, or publicly	traded stocks		
	Examples: Bond funds, investment ad	counts with brokerage firms, money market accounts		
	✓ No			
	Yes			
19.	Non-publicly traded stock and int an LLC, partnership, and joint ver	erests in incorporated and unincorporated businesses, including an interest in nture		
	☑ No			
20	Yes. Give specific information abo			
20.		s and other negotiable and non-negotiable instruments		
		nal checks, cashiers' checks, promissory notes, and money orders. you cannot transfer to someone by signing or delivering them.		
	☑ No			
04	Yes. Give specific information abo	ut them		
21.	Retirement or pension accounts			
	_	eogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans		
	No			
22	Yes. List each account separately Security deposits and prepaymer	te		
		ou have made so that you may continue service or use from a company		
	, ,	s, prepaid rent, public utilities (electric, gas, water), telecommunications		
	companies, or others			
	✓ No			
23.	_	payment of money to you, either for life or for a number of years)		
_0.	No	payment of money to you, other for the or for a number of young		
	Yes			
	_			

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Debtor 1 Charle

Charles J. Uvino

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24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ✓ No ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ✓ No Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ✓ No Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses Yes. Give specific information about them... Current value of the Money or property owed to you? portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you **✓** No Tyes. Give specific information about them, including whether you already filed the returns and the tax years... Federal: State: \$ 0.00 Local: \$ 0.00 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement No No Yes. Give specific information.... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ✓ No Yes. Give specific information.... 31. Interests in insurance policies Yes. Name the insurance company of each policy and list its value.... 32. Any interest in property that is due you from someone who has died Yes. Give specific information.... 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Yes. Give specific information.... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims ✓ No Yes. Give specific information.... 35. Any financial assets you did not already list ✓ No Yes. Give specific information... 36. Add the dollar value of the portion you own for all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here..... \$688.38

Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.

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Debtor 1

63. Total of all property on Schedule A/B. Add line 55 + line 62

37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. Yes. Go to line 38. Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. Part 6: If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. Yes. Go to line 47. Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ✓ No Yes. Give specific information... 54. Add the dollar value of all of your entries from Part 7. Write that number here \$0.00 **List the Totals of Each Part of this Form** 55. Part 1: Total real estate, line 2..... \$467,333.00 56. Part 2: Total vehicles, line 5 \$ 22,673.00 57. Part 3: Total personal and household items, line 15 \$ 2,730.00 58. Part 4: Total financial assets, line 36 \$ 688.38 59. Part 5: Total business-related property, line 45 \$ 0.00 60. Part 6: Total farm- and fishing-related property, line 52 \$ 0.00 61. Part 7: Total other property not listed, line 54 \$ 0.00 62. Total personal property. Add lines 56 through 61 \$ 26,091.38 Copy personal property total>

26,091.38

\$ 493,424.38

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Fill in this in	formation to ide	ntify your case:	
Debtor 1	Charles J. Uvino		
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse, if filing)	First Name	Middle Name	Last Name
United States I	Bankruptcy Court fo	r the: District of New Jersey	
Case number			()
(If known)			

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/22

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim	as Exempt		
 Which set of exemptions are you claiming? You are claiming state and federal nonbank 	•	, ,	
✓ You are claiming federal exemptions. 11 U		5. § 322(b)(3)	
2. For any property you list on Schedule A/B th	nat you claim as exempt, fil	I in the information below.	
Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Check only one box for each exemption	
47 Morris Avenue Brief description: Line from Schedule A/B: 1.1	\$ 467,333.00	\$ 27,900.00 100% of fair market value, up to any applicable statutory limit	11 USC § 522(d)(1)
Schedule A/B: 1.1 2018 RAM 1500 Crew Brief description: Line from Schedule A/B: 3.1	<u>\$</u> 22,673.00	4,450.00 100% of fair market value, up to any applicable statutory limit	11 USC § 522(d)(2)
Brief Household Goods - Household items description: Line from Schedule A/B: 6	<u>\$ 1,200.00</u>	\$ 1,200.00 100% of fair market value, up to any applicable statutory limit	11 USC § 522(d)(3)
3. Are you claiming a homestead exemption o (Subject to adjustment on 4/01/25 and every 3 ☑ No ☐ Yes. Did you acquire the property covered ☐ No ☐ Yes	years after that for cases filed	,	

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Debtor

Last Name

Additional Page

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Check only one box for each exemption	
Electronics - Cellphone, TVs			11 USC § 522(d)(3)
Brief	_{\$} 750.00	✓ \$ 750.00	
description:	Ψ	_	
Line from Schedule A/B: 7		100% of fair market value, up to any applicable statutory limit)
Clothing - Clothes, Shoes & Accessories			11 USC § 522(d)(3)
Brief description:	\$ <u>630.00</u>	\$\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	
Line from		any applicable statutory limit	
Schedule A/B: 11			
Jewelry - Wedding Band Brief			11 USC § 522(d)(4)
description:	\$ <u>150.00</u>	¥ 150.00	
description.		100% of fair market value, up to	
Line from		any applicable statutory limit	•
Schedule A/B: 12		, , , , , , , , , , , , , , , , , , ,	
Cash on hand (Cash on Hand)			11 USC § 522(d)(5)
Brief	_{\$} 25.00	\$ 25.00	
description:	*	=	
Line from		100% of fair market value, up to any applicable statutory limit)
Schedule A/B: 16		any applicable statutory limit	
TD Bank -7934 (Checking Account) Brief			11 USC § 522(d)(5)
description:	\$123.51	✓ \$ 123.51	
decomption.		100% of fair market value, up to	
Line from		any applicable statutory limit	,
Schedule A/B: 17.1		, аррисали спинату	
TD Bank -0411 (Joint) (Checking Account)			11 USC § 522(d)(5)
Ruet	_{\$} 539.87	√ \$ 539.87	
description:	Ψ	= -	
		100% of fair market value, up to)
Line from		any applicable statutory limit	
Schedule A/B: 17.2			
Brief	c		
description:	\$	∐ \$	
Line from		100% of fair market value, up to)
Schedule A/B:		any applicable statutory limit	
Brief	\$	□ \$	
description:	·	100% of fair market value, up to	
		any applicable statutory limit	,
Line from		any approad oracatory mine	
Schedule A/B:			
Brief	¢	Пф	
description:	\$	<u> </u> \$	
		100% of fair market value, up to	
Line from		any applicable statutory limit	
Schedule A/B:			
Brief	•		
description:	\$		
Line from		100% of fair market value, up to)
Schedule A/B:		any applicable statutory limit	
Brief	\$	□\$	
description:	*	100% of fair market value, up to	
		any applicable statutory limit	
Line from			
Schedule A/B:			
Brief	¢		
description:	\$	<u></u> \$	
		100% of fair market value, up to	
Line from		any applicable statutory limit	
Schedule A/B:			

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Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Check if this is an amended filing

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

your name and case number (if known).

1. Do any creditors have claims secured by your property?

No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.

Yes. Fill in all of the information below.

Part 1:	List All Secured Claims				
separa		han one secured claim, list the creditor tor has a particular claim, list the other creditors in shabetical order according to the creditor's name.	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
2.1		Describe the property that secures the claim:	\$ 19,465.00	\$ 22,673.00	\$ 0.00
Ally	Financial 2	018 RAM 1500 Crew - \$22,673.00			

Ally Financial Creditor's Name	2018 RAM 1500 Crew - \$22,673.00
Po Box 380901	
Number Street Minneapolis MN 55438	As of the date you file, the claim is: Check all that apply.
City State ZIP Code	Contingent
Who owes the debt? Check one.	☐ Unliquidated
Debtor 1 only	Disputed
☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	Nature of lien. Check all that apply.
At least one of the debtors and another	An agreement you made (such as mortgage or secured car loan)
☐ Check if this claim relates to a	Statutory lien (such as tax lien, mechanic's lien)
community debt	☐ Judgment lien from a lawsuit
Date debt was incurred 12-10-2021	Other (including a right to offset)
<u> </u>	Last 4 digits of account number 4965

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	Describe the property that secures the claim: \$ 362,247.22	\$ <u>467,333.00</u>	\$ <u>0.00</u>
NewRez LLC Creditor's Name c/o Shellpoint Mortgage Servicing	47 Morris Avenue, West Milford, NJ 07480 - \$467,333.00 - \$467,333.00 (Value) - \$46,733.30 = \$420,599.70 - \$362,247.22 = \$58,352.48 /2 = \$29,176.24 - \$27,900.00 - (Exemption) = \$1,276.24 (Non-Exempt Equity)		
Number Street P.O. Box 650840	As of the date you file, the claim is: Check all that apply.		
Dallas TX 75265 City State ZIP Code Who owes the debt? Check one.	Contingent Unliquidated Disputed		
Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	Nature of lien. Check all that apply. ✓ An agreement you made (such as mortgage or secured car loan) ☐ Statutory lien (such as tax lien, mechanic's lien) ☐ Judgment lien from a lawsuit		
Check if this claim relates to a community debt	Other (including a right to offset) Last 4 digits of account number 7501		
Date debt was incurred	-		

Part 2:

List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

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Boodinen	1 age 15 of 01
Fill in this information to identify your case:	
Debtor 1 Charles J. Uvino First Name Last Name	
Debtor 2 (Spouse, if filling) First Name Middle Name Last Name	
United States Bankruptcy Court for the: District of New Jersey	
Case number (if know)	☐ Check if this is an amended filing
OW: 15 4005/5	9
Official Form 106E/F	
Schedule E/F: Creditors Who Have	Unsecured Claims 12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

Part 1: List All of Your PRIORITY Unsecured Cla	ims			
1. Do any creditors have priority unsecured claims a No. Go to Part 2. Yes.	gainst you?			
amounts. As much as possible, list the claims in alph	n has both priority and nonpriority amounts, list that clain nabetical order according to the creditor's name. If you h re than one creditor holds a particular claim, list the othe	n here and shown ave more than	w both priority two priority ur	and nonpriority secured
		Total claim	Priority amount	Nonpriority amount
Internal Revenue Service	Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify	\$ 0.00	\$ 0.00	\$ 0.00

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State of New Jersey, Division of Taxation Priority Creditor's Name	Last 4 digits of account number When was the debt incurred?	\$ 0.00	\$ 0.00	\$ 0.00
Compliance and Enforcement - Bankruptcy Unit Number Street 3 John Fitch Way, 5th Floor, Po box 245	As of the date you file, the claim is: Check all that apply. Contingent Unliquidated			
Trenton NJ 08695	Disputed			
City State ZIP Code Who owes the debt? Check one. ✓ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim relates to a community debt Is the claim subject to offset? ✓ No ☐ Yes	Type of PRIORITY unsecured claim: □ Domestic support obligations ☑ Taxes and certain other debts you owe the government □ Claims for death or personal injury while you were intoxicated □ Other. Specify			

Part	1: Your PRIORITY Unsecured Claims — Cor	ntinuation Page			
After	r listing any entries on this page, number them l orth.	beginning with 2.3, followed by 2.4, and	Total claim	Priority amount	Nonpriority amount
2.3	Suzanne H. Uvino Priority Creditor's Name	Last 4 digits of account number When was the debt incurred?	\$ 29,742.00	\$ 29,742.00	\$ 0.00
	Po Box 551 Number Street Jacksonville VT 05342	As of the date you file, the claim is: Check all that apply. Contingent			
	City State ZIP Code Who owes the debt? Check one. Debtor 1 only	Unliquidated Disputed			
	Debtor 2 only Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured claim: ☑ Domestic support obligations ☐ Taxes and certain other debts you owe the			
	At least one of the debtors and another Check if this claim relates to a community debt	government Claims for death or personal injury while you were intoxicated			
	Is the claim subject to offset? ☑ No ☐ Yes	Other. Specify			
Part	2: List All of Your NONPRIORITY Unsecured	l Claims			
	any creditors have nonpriority unsecured clair No. You have nothing else to report in this part Yes. Fill in all of the information below.	ns against you? Submit to the court with your other schedules.			
n in	onpriority unsecured claim, list the creditor separate	ne alphabetical order of the creditor who holds eacely for each claim. For each claim listed, identify what to particular claim, list the other creditors in Part 3.If you have	ype of claim it is.	Do not list clai	ms already
					Total claim
4.1	Bank of Missouri / Continental Finance	Last 4 digits of account number 2138			\$ Unknown
	Nonpriority Creditor's Name	When was the debt incurred? 01-10-2013			ψ <u>στικτιστιντι</u>
	Po Box 11743 Number	As of the date you file, the claim is: Check all that	apply.		
	Street Wilmington DE 19850	☐ Contingent ☐ Unliquidated			
	City State ZIP Code Who owes the debt? Check one.	Disputed			
	Debtor 1 only	Type of NONPRIORITY unsecured claim: Student loans			
	Debtor 2 only Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement of that you did not report as priority claims	r divorce		
	☐ At least one of the debtors and another ☐ Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other debts	similar		
	Is the claim subject to offset? No	✓ Other. Specify Credit Card Debt			
	Yes				
4.2	Bauer & Karch Law Group LLC Nonpriority Creditor's Name	Last 4 digits of account number When was the debt incurred?			\$ <u>459.72</u>
	27 Main Street Number	As of the date you file, the claim is: Check all that Contingent	apply.		
	Street Lebanon NJ 08833	Unliquidated			
	City State ZIP Code Who owes the debt? Check one.	Disputed			
	Debtor 1 only	Type of NONPRIORITY unsecured claim:			
	Debtor 2 only	Student loans Obligations arising out of a separation agreement of	r divorce		
	Debtor 1 and Debtor 2 only At least one of the debtors and another	that you did not report as priority claims			
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other debts	sımılar		
	Is the claim subject to offset?	✓ Other. Specify			
	☑ No ☐ Yes				

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4.3	Best Egg Nonpriority Creditor's Name	Last 4 digits of account number 8006 When was the debt incurred? 03-22-2023	\$ 33,205.00
	Po Box 42912 Number Street Philadelphia PA 19101	As of the date you file, the claim is: Check all that apply. Contingent Unliquidated	
	City State ZIP Code Who owes the debt? Check one.	☐ Disputed	
	Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	Student loans	
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar	
	Check if this claim relates to a community debt	debts Other Specify Manies Leaned / Advanced	
	Is the claim subject to offset?	✓ Other. Specify Monies Loaned / Advanced	
	✓ No		
	Yes		
4.4	Conital One Financial Corn	Last 4 digits of account number 5864	\$ 10,103.00
	Capital One Financial Corp Nonpriority Creditor's Name	When was the debt incurred? 01-17-2013	Ψ 10,100.00
	11013 W Broad Street	As of the date you file, the claim is: Check all that apply.	
	Number Street	Contingent	
	Glen Allen VA 23060	Unliquidated	
	City State ZIP Code Who owes the debt? Check one.	☐ Disputed	
	Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	Student loans	
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar	
	Check if this claim relates to a community	debts	
	debt Is the claim subject to offset?	Other. Specify Credit Card Debt	
	✓ No		
	Yes		
4.5		Last 4 digits of account number 0869	+ 7.407.00
4.5	Citibank CBNA	When was the debt incurred? 07-09-2021	\$ <u>7,197.00</u>
	Nonpriority Creditor's Name		
	Po Box 6497 Number	As of the date you file, the claim is: Check all that apply.	
	Sioux Falls SD 57117	☐ Contingent ☐ Unliquidated	
	City State ZIP Code	☐ Disputed	
	Who owes the debt? Check one.	Disputed	
	Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	Student loans	
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar	
	Check if this claim relates to a community debt	debts	
	Is the claim subject to offset?	Other. Specify Credit Card Debt	
	No		
	Yes		

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4.6	Credit One Bank Nonpriority Creditor's Name	Last 4 digits of account number 0269 When was the debt incurred? 11-08-2022	\$ <u>1,667.00</u>
	PO Box 98873	As of the date you file, the claim is: Check all that apply.	
	Number	Contingent	
	Street Las Vegas NV 89193	Unliquidated	
	City State ZIP Code Who owes the debt? Check one.	Disputed	
	Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	Student loans	
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce	
	At least one of the debtors and another	that you did not report as priority claims	
	Check if this claim relates to a community	Debts to pension or profit-sharing plans, and other similar debts	
	debt	Other. Specify Credit Card Debt	
	Is the claim subject to offset?		
	✓ No		
	Yes		
4.7		Last 4 digits of account number 7301	\$ 2,183.00
7.1	Credit One Bank Nonpriority Creditor's Name	When was the debt incurred? 01-28-2019	\$ <u>2,163.00</u>
	' '		
	Po Box 98875 Number	As of the date you file, the claim is: Check all that apply.	
	Street Las Vegas NV 89193	Contingent	
		Unliquidated	
	City State ZIP Code Who owes the debt? Check one.	Disputed	
	Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	Student loans	
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce	
	At least one of the debtors and another	that you did not report as priority claims	
	Check if this claim relates to a community	Debts to pension or profit-sharing plans, and other similar debts	
	debt	Other. Specify Credit Card Debt	
	Is the claim subject to offset?	_ care epoca, croam cara post	
	✓ No		
	Yes		
4.8		Last 4 digits of account number 1727	¢ 0.821.00
4.0	Discover Financial Services	When was the debt incurred? 10-27-2022	\$ 9,831.00
	Nonpriority Creditor's Name		
	Pob 15316 Number	As of the date you file, the claim is: Check all that apply.	
	Street	Contingent	
		Unliquidated	
	City State ZIP Code Who owes the debt? Check one.	Disputed	
	Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	Student loans	
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar	
	Check if this claim relates to a community debt	debts	
	dept Is the claim subject to offset?	✓ Other. Specify Credit Card Debt	
	No		
	Yes		

Charles 24 19 552 SLM Doc 1 Filed 02/20/24 Entered 02/20/24 99:20:38 know Desc Main

		Document Page 24 of 61	
4.9	Kohl's / Capital One Nonpriority Creditor's Name	Last 4 digits of account number 9695 When was the debt incurred? 04-15-2014	\$ 304.00
	Po Box 3115	As of the date you file, the claim is: Check all that apply.	
	Number	Contingent	
	Milwaukee WI 53201	Unliquidated	
	City State ZIP Code Who owes the debt? Check one.	Disputed	
	✓ Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	Student loans	
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce	
	At least one of the debtors and another	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar	
	Check if this claim relates to a community debt	debts	
	Is the claim subject to offset?	Other. Specify Credit Card Debt	
	✓ No		
	Yes		
4.10	PNC Financial Services	Last 4 digits of account number 1530	\$ 13,080.00
	Nonpriority Creditor's Name	When was the debt incurred? 06-02-2019	
	P.O.Box 500	As of the date you file, the claim is: Check all that apply.	
	Number Street	Contingent	
	Portage MI 49081	Unliquidated	
	City State ZIP Code Who owes the debt? Check one.	Disputed	
	Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	Student loans	
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce	
	At least one of the debtors and another	that you did not report as priority claims	
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	✓ Other. Specify Credit Card Debt	
	✓ No		
	Yes		
		Last 4 digits of account number	
4.11	Ronda Casson Cotroneo Esq.	When was the debt incurred?	\$ <u>435.50</u>
	Nonpriority Creditor's Name	When was the dest mounted.	
	1599 Hamburg Tpke	As of the date you file, the claim is: Check all that apply.	
	Number	☐ Contingent	
	Wayne NJ 07470	Unliquidated	
	City State ZIP Code Who owes the debt? Check one.	Disputed	
	✓ Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	Student loans	
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce	
	At least one of the debtors and another	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar	
	Check if this claim relates to a community debt	debts Other. Specify	
	Is the claim subject to offset?		
	✓ No		
	Yes		

Debtor	Charles 24 Industrante State Doc 1		Enter ge 25 c	red 02/20/24 ⁰⁹⁹ :20:38 ^{knov} 0 of 61	esc Main
	rnchrony Bank/P.C. Richard & Son	Last 4 digits of accoun When was the debt inc			\$ <u>4,999.00</u>
<u>P</u>	O Box 276	_ As of the date you file,	the claim	is: Check all that apply.	
	^{mber} Street ayton OH 45401	☐ Contingent _ ☐ Unliquidated			
Cit W	y State ZIP Code ho owes the debt? Check one.	Disputed			
	Debtor 1 only Debtor 2 only	Type of NONPRIORITY Student loans	unsecure	ed claim:	
	Debtor 1 and Debtor 2 only	=		ration agreement or divorce	
_ =	At least one of the debtors and another Check if this claim relates to a community	'		g plans, and other similar	
	debt the claim subject to offset?	Other. Specify Credit	Card Debt		
✓	No				
	Yes	Last 4 digits of accoun	t number	1478	÷ 0.040.00
	ne Home Depot/Citibank N.A. npriority Creditor's Name	- When was the debt inc			\$ <u>9,613.00</u>
_	Box 9714	_ As of the date you file,	the claim	is: Check all that apply.	
_	ay TN 37615	☐ Contingent _ ☐ Unliquidated			
Cit W	y State ZIP Code ho owes the debt? Check one.	Disputed			
_	Debtor 1 only	Type of NONPRIORITY Student loans	unsecure	ed claim:	
_ =	Debtor 2 only Debtor 1 and Debtor 2 only	Obligations arising out		ration agreement or divorce	
	At least one of the debtors and another	that you did not report Debts to pension or pr debts		g plans, and other similar	
	debt	Other. Specify Credit	Card Debt		
	the claim subject to offset? No				
	Yes				
Part 3:	List Others to Be Notified About a Debt	That You Already Listed			
collec agend	nis page only if you have others to be notif tion agency is trying to collect from you fo y here. Similarly, if you have more than on o not have additional persons to be notifie	or a debt you owe to somed e creditor for any of the de	one else, l ebts that y	ist the original creditor in Parts 1 or ou listed in Parts 1 or 2, list the add	2, then list the collection
Part 4:	Add the Amounts for Each Type of Unse	ecured Claim			
	the amounts of certain types of unsecured ne amounts for each type of unsecured cla		s for statis	stical reporting purposes only. 28 U.	S.C. § 159.
				Total claim	
Total cl			6a.	\$ 29,742.00	
from Pa	ort 1 6b. Taxes and certain other debts y government	you owe the	6b.	\$ 0.00	
	6c. Claims for death or personal in intoxicated	jury while you were	6c.	\$ 0.00	
	6d. Other. Add all other priority unse amount here.	ecured claims. Write that	6d.	\$ 0.00	
	6e. Total. Add lines 6a through 6d.		6e.	\$ <u>29,742.00</u>	

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				Total claim
Total claims from Part 2	6f. Student loans	6f.	\$ (0.00
nom r art 2	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$!	0.00
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h.	\$!	0.00
	6i. Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$!	93,077.22
	6j. Total. Add lines 6f through 6i.	6j.	\$	\$ 93,077.22

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Fill in this	information to	identify your case	:
Debtor 1	Charles J. Uv	rino	
Debtor 1	First Name	Middle Name	Last Name
	f filing) First Name	Middle Name	Last Name
Case numl (if know)	ber		

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease State what the contract or lease is for

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Fill in this	information to	identify your case	: :
Debtor 1	Charles J. U	vino	
DODIO! I	First Name	Middle Name	Last Name
	f filing) First Name	Middle Name Court for the: Distr	Last Name
Case numb (if know)	ber		

Official Form 106H

Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

1. Do you have any codebtors? (If you are filing a joint case, do not list either	er spouse as a codebtor.)				
✓ No					
Yes					
2. Within the last 8 years, have you lived in a community property state or territory? (<i>Community property states and territories</i> include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)					
No. Go to line 3.					
Yes. Did your spouse, former spouse, or legal equivalent live with you at	the time?				
3. In Column 1, list all of your codebtors. Do not include your spouse as shown in line 2 again as a codebtor only if that person is a guarantor of Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), Schedule E/F, or Schedule G to fill out Column 2.	or cosigner. Make sure you have listed the creditor on				
Column 1: Your codebtor	Column 2: The creditor to whom you owe the debt Check all schedules that apply:				

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Charles J. Uvino Trainisms Write Note Lex hore United States Barinspage Court for the District of New Jersey United States Barinspage Court for the District of New Jersey United States Barinspage Court for the District of New Jersey United States Barinspage Court for the District of New Jersey United States Barinspage Court for the District of New Jersey United States Barinspage Court for the District of New Jersey United States Barinspage Court for the District of New Jersey United States Barinspage Court for the District of New Jersey United States Barinspage Court for the United States United State	Fill in this information to identify	your case:					
Part 1: Describe Employment Information and care thin for matter every question. Part 1: Describe States and accurate as possible. If two married and not filing plottly, and your spouse is living with you, include information about your spouse. If most your supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If more space is the filing the part of the following date: Part 1: Describe Employment Part 1: Part 1: Describe Employment Part 1: Part 1: Describe Employment Part 1: Part 2: Part 1: Part 3: Pa	Charles J. Uvino)					
Check if this is: Check This is: An amended filing An am	First Name	Middle Name	Last Name				
Case number Check if this is: Check if thi		Middle Name	Last Name				
An amended filing A supplement showing postpetition chapter 13 income as of the following date: MM / DO / YYYY 12/15 Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If you are separated and your spouse is needed, attach a separated space to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Employment 1. Fill in your employment information about your spouse. If you are employed information about your spouse. If you need marked the professional pages, write your name and case number (if known). Answer every question. Part 1: Describe Employment 1. Fill in your employment information about your spouse. If you need marked a separate page with information about additional employers. Include part-time, seasonal, or self-employed work. Occupation may include student or homemaker, if it applies. Coccupation may include student or homemaker, if it applies. Employer's name Employer's address 360 Mt. Kemble Avenue 31 State Highway 181 Number Steed Artech LLC Schools Artech LLC Morristown, NJ 07960 City State ZIP Code Artech LLC Give Details About Monthly Income Part 2: Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse below. If you row your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you row from space, allow a sparated is sheet to this form. For Deb	United States Bankruptcy Court for the:	District of New Jersey					
An amended filing A supplement showing postpetition chapter 13 income as of the following date: An amended filing			,		Check if	this is:	
Schedule I: Your Income Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are approached and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Employment 1. Fill in your employment information. If you have more than one job, attach a separate page with information about additional employers. Include part-time, seasonal, or self-employed work. Occupation Occupation Debtor 1 Debtor 2 or non-filling spouse Employer's name Employer's address 360 Mt. Kemble Avenue Number Street Suite 2000 Morristown, NJ 07960 Lake Hopatcong, NJ 07849 How long employed there? 3 years 30 years Part 2: Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space, include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 For Debtor 2 Self-97.51 Lake Hopatcong, NJ 07849 State ZIP Code 2 4 4,992.00 Self-97.51 Lake Hopatcong, NJ 07849 Lake Ho	,					•	2
Be as complete and accurate as possible. If two married people are filling together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filling jointly, and your spouse is living with you, include information about your spouse is five or include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Employment 1. Fill in your employment information. If you have more than one job, statch a separate page with information about updotional employers. Include part-time, seasonal, or self-employed work. Occupation may include student or homemaker, if it applies. Cocupation may include student or homemaker, if it applies. Employer's address 360 Mt. Kemble Avenue Number Street Artech LLC Jefferson Township Public Schools Morristown, NJ 07960 City State ZIP Code Alse Hopatcong, NJ 07849 City State ZIP Code Alse Hopatcong, NJ 07849 City State ZIP Code Alse Hopatcong, NJ 07849 City State ZIP Code Also years Part 2: Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing posse have more than one employer, combine the information for all employers for that person on the lines below. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you or you non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you or you non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you or you non-filing spouse have more than one employer, combine the information for all employers for							3
Be as complete and accurate as possible. If two married people are filling together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filling jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filling with you, do not include information about your spouse. If you are sport and and your spouse is not filling with you, do not include information about your spouse. If nore space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (If known). Answer every question. Part 1: Describe Employment 1. Fill in your employment information. If you have more than one job, attach a separate page with information about additional employers. Include part-time, seasonal, or self-employed work. Occupation may include student or homemaker, if it applies. Employer's name Employer's name Employer's address 360 Mt. Kernble Avenue Number Street Suite 2000 Morristown, NJ 07960 Lake Hopatcong, NJ 07849 City State ZIP Code 30 years Part 2: Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filling spouse unless you are separated. If you or your non-filling spouse have more than one employer, combine the information for all employers for that person on the lines below. If you or you non-filling spouse 2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. 2. List monthly overtime pay. 3. Estimate and list monthly overtime pay.	Official Form 106I				MM /	DD / YYYY	
supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are spearated and your spouse is not filing with you, do not include information about your spouse. If you have more than one job, attach a separate page with information about additional employers. Include part-time, seasonal, or self-employed work. Occupation may include student or homemaker, if it applies. Employer's name Employer's address Employer's address Scientific Application Trainer Artech LLC Scientific Application Trainer Artech LLC Schools Employer's name Employer's address Scientific Application Trainer Femployer's name Employer's address Scientific Application Trainer Artech LLC Schools Artech LLC Schools Artech LLC Lake Hopatcong, NJ 07849 Lake Hopatcong, NJ 07849 City State ZIP Code 30 years Part 2: Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 For Debtor 1 For Debtor 2 or non-filing spouse Lake Hopatcong, NJ 07849 City State ZIP Code 30 years	Schedule I: You	ır Income				12/15	
If you have more than one job, attach a separate page with information about additional employers. Include part-time, seasonal, or self-employed work. Occupation may include student or homemaker, if it applies. Employer's name Employer's name Employer's address 360 Mt. Kemble Avenue Number Street Suite 2000 Morristown, NJ 07960 City State ZIP Code City State ZIP Code How long employed there? 3 years Sive Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filling spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filing spouse Employed Not employed	supplying correct information. If you flyou are separated and your spou separate sheet to this form. On the	ou are married and not filing is a is not filing with you, do top of any additional pag	ng jointly, and yo Io not include inf	ur spouse ormation a	is living with about your sp	you, include information about your spou ouse. If more space is needed, attach a	ise.
attach a separate page with information about additional employers. Include part-time, seasonal, or self-employed work. Occupation may include student or homemaker, if it applies. Employer's name Employer's name Employer's address Aftech LLC Employer's address 360 Mt. Kemble Avenue Number Street Suite 2000 Morristown, NJ 07960 City State ZIP Code How long employed there? 3 years Avears Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filing spouse 2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. 2. \$4,992.00 \$8.597.51 \$0.00			Debtor 1			Debtor 2 or non-filing spouse	
Scientific Application Trainer Occupation may include student or homemaker, if it applies. Artech LLC	attach a separate page with information about additional	Employment status		ed			
Artech LLC Employer's name Employer's address Employer's address Artech LLC Jefferson Township Public Schools 31 State Highway 181 Number Street Suite 2000 Morristown, NJ 07960 City State ZIP Code City State ZIP Code 30 years Part 2: Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filing spouse 2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. 2. \$4,992.00 \$8,597.51 \$4,000.00 According to the first public Schools Number Street Artech LLC Jefferson Township Public Schools Number Street Attach Alegan Township Public Schools According to the first public schools		Occupation	Scientific A	pplicatior	n Trainer	Teacher	
Employer's address 360 Mt. Kemble Avenue		Occupation	Artech LLC				_
Number Street Suite 2000 Number Street Suite 2000		Employer's name					
Suite 2000 Morristown, NJ 07960 City State ZIP Code 30 years Part 2: Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filing spouse 2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. 2. \$4,992.00 \$8,597.51 3. Estimate and list monthly overtime pay.		Employer's address	360 Mt. Kei	mble Ave	enue	31 State Highway 181	
City State ZIP Code City State ZIP Code 30 years						Number Street	_
City State ZIP Code City State ZIP Code 30 years						<u> </u>	_
How long employed there? 3 years 30 years						- <u> </u>	
Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filing spouse 2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. 3. Estimate and list monthly overtime pay. 3. + 0.00 4.000.00 4.000.00 4.000.00		How long employed then	,	State Z	IP Code	,	
Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filing spouse 2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. 2. \$\frac{4,992.00}{5}\$ \$\frac{8,597.51}{0.00}\$ SESTIMATE AND SOLUTION OF THE STORY OF THE STO		rion long employed ale.	or o years			- Oo yearo	_
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3. Estimate and list monthly overtime pay. 3. +\$ 0.00 + \$ 0.00				2.	4,992.00		
4. Calculate gross income. Add line 2 + line 3. 4. \$\[\\$ _ \] 4,992.00 \$\[\\$ _ \] 8,597.51	3. Estimate and list monthly over	time pay.		»_ 3. + \$_		Ψ	
<u> </u>	Calculate gross income. Add li	ne 2 + line 3.		4. \$_	4,992.00	\$8,597.51	

Official Form 106l Schedule I: Your Income page 1

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			Fo	r Debtor 1			ebtor 2 or iling spouse				
	Copy line 4 here	→ 4.	\$	4,992.00		\$	8,597.51				
	List all payroll deductions:	→ 4.	Φ_			Φ_					
	5a. Tax, Medicare, and Social Security deductions	5a.	Φ.	1,195.83		æ	1,960.29				
	5b. Mandatory contributions for retirement plans	5a. 5b.	\$_ \$	0.00		Φ	591.69				
	5c. Voluntary contributions for retirement plans	5c.	Ψ_ \$	0.00		φ	31.56				
	5d. Required repayments of retirement fund loans	5d.	Ψ_ \$	0.00		φ	0.00				
	5e. Insurance	5e.	Ψ_ \$	0.00		Ψ_ \$	661.17				
	5f. Domestic support obligations	5f.	Ψ_ \$	0.00		Ψ_ \$	0.00				
	•		\$_ \$	0.00		\$ \$	106.57				
	5g. Union dues 5h. Other deductions. Specify: Summer Savings	5g.	+\$	0.00			675.00				
	0	JII.	' \$_ \$	0.00		+ \$_	0.00				
		-	Ψ_ \$			\$	3.00				
		-	\$_			\$_					
6	Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5h	. 6.	•	1,195.83		2	4,026.28				
	Calculate total monthly take-home pay. Subtract line 6 from line 4.	. o. 7.	φ_ \$	3,796.17		Ψ \$	4,571.23				
۲.	Calculate total monthly take-nome pay. Subtract line o nom line 4.	7.	Ψ_			Ψ	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
8.	List all other income regularly received:										
	8a. Net income from rental property and from operating a business,										
	profession, or farm										
	Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total		Ф	0.00		¢	0.00				
	monthly net income.	8a.	Ψ_			Ψ					
	8b. Interest and dividends	8b.	\$_	0.00		\$_	0.00				
	8c. Family support payments that you, a non-filing spouse, or a depend regularly receive	ient									
	Include alimony, spousal support, child support, maintenance, divorce	•	\$	0.00		\$	0.00				
	settlement, and property settlement.	8c.		0.00		\$	0.00				
	8d. Unemployment compensation 8e. Social Security	8d. 8e.	\$_ \$	0.00		ֆ \$	0.00				
	8f. Other government assistance that you regularly receive		Ψ_			Ψ					
	Include cash assistance and the value (if known) of any non-cash assista	ance									
	that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.										
	Specify:	8f.	\$_	0.00		\$_	0.00				
	8g. Pension or retirement income	8g.	•	0.00		2	0.00				
		_	Ψ_	0.00		Ψ_	0.00				
	8h. Other monthly income. Specify:	_ 8h.	+ \$_			+ \$_		7			
9.	Add all other income . Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.	9.	\$_	0.00		\$_	0.00				
10.	Calculate monthly income. Add line 7 + line 9.			2 706 17	١.		4 E71 00]		8,367.40	_
	Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	. \$_	3,796.17	+	\$_	4,571.23	=	\$	0,007.40	_
11.	State all other regular contributions to the expenses that you list in Scho	edule .	 J.		•						
	Include contributions from an unmarried partner, members of your household,	, your c	depen	dents, your roo	omn	nates, a	and other				
	friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are	e not a	vailah	le to nav evne	nea	e lietad	Lin Schedule I				
	Specify:	c not a	valiab	ic to pay expe	1130	3 113100		+	\$		
12	Add the amount in the last column of line 10 to the amount in line 11. The	o rocu	It is th	o combined m	onti	- alv inco		I	<u> </u>		_
12.	Write that amount on the Summary of Your Assets and Liabilities and Certain					•	12.		\$	8,367.40	
	·									nbined	_
13.	. Do you expect an increase or decrease within the year after you file this	form	?						mor	nthly income)
	✓ No.										
	☐ Yes. Explain:										

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Fill in this information to identify	your case:				
Debtor 1 Charles J. Uvino		Check if this	o io:		
First Name Debtor 2	Middle Name Last Name				
(Spouse, if filing) First Name	Middle Name Last Name	An amer		•	petition chapter 13
United States Bankruptcy Court for the:	District of New Jersey			the following	
Case number	(·	MM / DD	/ YYYY		
(If known)					
Official Form 106J					
Schedule J: You	ur Expenses				12/15
Be as complete and accurate as poinformation. If more space is neede (if known). Answer every question.	ed, attach another sheet to this form				
Part 1: Describe Your Hou	sehold				
1. Is this a joint case? No. Go to line 2. Yes. Does Debtor 2 live in a s No Yes. Debtor 2 must file	eparate household? e Official Form 106J-2, <i>Expenses for</i> S	Separate Household of Debtor 2.			
2. Do you have dependents?	□ No	Damandantia valatianakin ta		Daman danti'a	Dage dependent live
Do not list Debtor 1 and	Yes. Fill out this information for	Dependent's relationship to Debtor 1 or Debtor 2		Dependent's age	Does dependent live with you?
Debtor 2.	each dependent	Child	-	19	□ No
Do not state the dependents' names.			-		Yes
					∐No □voo
					∐Yes □ _{No}
			-		Yes
					No
			_		Yes
			_		⊟ No
					Yes
3. Do your expenses include expenses of people other than yourself and your dependents?	V No ☐ Yes				
Part 2: Estimate Your Ongoi	ng Monthly Expenses				
Estimate your expenses as of your		re using this form as a supplem	nent in a	Chanter 13 c	ase to report
expenses as of a date after the ban applicable date.		=		-	
Include expenses paid for with non	-cash government assistance if you	ı know the value of			
such assistance and have included	•	•		Your exper	nses
 The rental or home ownership e any rent for the ground or lot. 	xpenses for your residence. Include	first mortgage payments and	4.	\$	3,079.06
If not included in line 4:					0.00
4a. Real estate taxes			4a.	\$	0.00
4b. Property, homeowner's, or re			4b.	\$	100.00
4c. Home maintenance, repair, a			4c.	\$	
 4d. Homeowner's association or 	condominium dues		4d.	\$	0.00

4d.

4d. Homeowner's association or condominium dues

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Debtor 1

Charles J. Uvino

First Name Middle Name Last Name Case number (# known)_

		Your	expenses
5. Additional mortgage payments for your residence, such as home equity loans	5.	\$	0.00
6. Utilities:			
6a. Electricity, heat, natural gas	6a.	\$	185.00
6b. Water, sewer, garbage collection	6b.	\$	0.00
6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	245.00
6d. Other. Specify:	6d.	\$	0.00
7. Food and housekeeping supplies	7.	\$	750.00
8. Childcare and children's education costs	8.	\$	0.00
9. Clothing, laundry, and dry cleaning	9.	\$	50.00
10. Personal care products and services	10.	\$	55.00
11. Medical and dental expenses	11.	\$	25.00
 Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. 	12.	\$	250.00
13. Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	50.00
14. Charitable contributions and religious donations	14.	\$	0.00
15. Insurance.Do not include insurance deducted from your pay or included in lines 4 or 20.			
15a. Life insurance	15a.	\$	0.00
15b. Health insurance	15b.	\$	0.00
15c. Vehicle insurance	15c.	\$	234.00
15d. Other insurance. Specify:	15d.	\$	0.00
16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:	16.	\$	0.00
17. Installment or lease payments:			
17a. Car payments for Vehicle 1	17a.	\$	423.16
17b. Car payments for Vehicle 2	17b.	\$	0.00
17c. Other. Specify:	17c.	\$	0.00
17d. Other. Specify:	17d.	\$	0.00
18. Your payments of alimony, maintenance, and support that you did not report as deducte your pay on line 5, Schedule I, Your Income (Official Form 106I).	ed from 18.	\$	1,318.00
19. Other payments you make to support others who do not live with you.			
Specify:	19.	\$	0.00
20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I:)	our Income.		
20a. Mortgages on other property	20a.	\$	0.00
20b. Real estate taxes	20b.	\$	0.00
20c. Property, homeowner's, or renter's insurance	20c.		0.00
20d. Maintenance, repair, and upkeep expenses	20d.		0.00
20e. Homeowner's association or condominium dues	20e.	\$	0.00

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Debtor 1 Charles J. Uvino First Name Middle Name Last Name	Case number (if known)		
Filst Name wildule Name Last Name			
Other. Specify: Non-Filing Spouse Debt Services	21.	+\$	550.00
Ion-Filing Spouse Vehicle Payment		+\$	350.00
		+\$	
2. Calculate your monthly expenses.			
22a. Add lines 4 through 21.	22a.	\$	7,664.22
22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 22	c. Add line 22a 22b.	\$	
and 22b. The result is your monthly expenses.	22c.	\$	7,664.22
3. Calculate your monthly net income.			
23a. Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	8,367.40
23b. Copy your monthly expenses from line 22c above.	23b.	- \$	7,664.22
23c. Subtract your monthly expenses from your monthly income.			703.18
The result is your monthly net income.	23c.	Ф	
4. Do you expect an increase or decrease in your expenses within the year after you	file this form?		
For example, do you expect to finish paying for your car loan within the year or do you ex	xpect your		
mortgage payment to increase or decrease because of a modification to the terms of you	ur mortgage?		
✓ No.			
Yes. Explain here:			
L			

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Fill in this inf	formation to ide	entify your case:		
Debtor 1	Charles J. Uv	vino Middle Name	Last Name	
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	
United States E	Bankruptcy Court fo	or the District of New Jersey		
Case number (If known)				

☐ Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

No	
Yes. Name of person	. Attach Bankruptcy Petition Preparer's Notice, Declaration, and
	Signature (Official Form 119).
lor populty of porjury I declare that I h	payo road the summary and schedules filed with this declaration and
	nave read the summary and schedules filed with this declaration and
der penalty of perjury, I declare that I h t they are true and correct.	nave read the summary and schedules filed with this declaration and
	nave read the summary and schedules filed with this declaration and
	nave read the summary and schedules filed with this declaration and
	nave read the summary and schedules filed with this declaration and

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Fill in this in	formation to ident	tify your case:	
Debtor 1	Charles J. Uvir	10	
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse, if fil	ling) First Name	Middle Name	Last Name
United States	s Bankruptcy Court	for the: District of New	Jersey
	, ,		•
Case number (if know)	r		
(II KIIOW)			

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

4/22

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Give Details About Your Marital Status and	d Where You Lived Befo	ore		
 What is your current marital status? Married Not married During the last 3 years, have you lived anywhere o 	ther than where you live	e now?		
☐ No ✓ Yes. List all of the places you lived in the last 3 years.	•			
	Dates Debtor 1 lived there	Debtor 2:	_	Dates Debtor 2 ived there
		Same as Debtor 1		Same as Debtor 1
5602 Tudor Drive Number Street Pompton Plains NJ 07444	From <u>01/01/2020</u> To <u>01/01/2022</u>	Number Street		From To
City State ZIP Code		City State ZIP Code		
 3. Within the last 8 years, did you ever live with a spoproperty states and territories include Arizona, Californ Wisconsin.) No Yes. Make sure you fill out Schedule H: Your Code Part 2: Explain the Sources of Your Income	nia, Idaho, Louisiana, Nev	ada, New Mexico, Puerto		
4. Did you have any income from employment or from Fill in the total amount of income you received from all If you are filing a joint case and you have income that	jobs and all businesses,	including part-time activiti	es.	ears?
□No				
✓ Yes. Fill in the details.	Debtor 1		Debtor 2	
	Sources of income Check all that apply	Gross income (before deductions and exclusions)	Sources of income	Gross income (before deductions and exclusions)
From January 1 of current year until the date you filed for bankruptcy:	Wages, commissions bonuses, tips	s, \$ <u>11,750.40</u>	Wages, commissions bonuses, tips	s, \$
	Operating a business	s	Operating a business	5

Case 24-11552-SLM D Charles J. Uvino First Name Middle Name Last Name	oc 1 Filed 02/20/24 Entered 0 Document Page 36 of 61	
For last calendar year:	✓ Wages, commissions, bonuses, tips \$ 79,712.00	Wages, commissions, bonuses, tips \$
(January 1 to December 31, 2023	Operating a business	Operating a business
For the calendar year before that:	✓ Wages, commissions, bonuses, tips \$ 103,642.56	☐ Wages, commissions, bonuses, tips \$
(January 1 to December 31, 2022	Operating a business	Operating a business
unemployment, and other public benefit paym and gambling and lottery winnings. If you are Debtor 1. List each source and the gross income from e	nis year or the two previous calendar years? ome is taxable. Examples of other income are alimotents; pensions; rental income; interest; dividends; refiling a joint case and you have income that you recach source separately. Do not include income that	noney collected from lawsuits; royalties; eived together, list it only once under
Yes. Fill in the details.		
Part 3: List Certain Payments You Made	Before You Filed for Bankruptcy	
"incurred by an individual primarily fo During the 90 days before you filed fo No. Go to line 7. Yes. List below each creditor to we the total amount you paid that creas child support and alimony. Also * Subject to adjustment on 4/01/25 are Yes. Debtor 1 or Debtor 2 or both have During the 90 days before you filed to No. Go to line 7. Yes. List below each creditor to we creditor. Do not include pay	primarily consumer debts. Consumer debts are der a personal, family, or household purpose." or bankruptcy, did you pay any creditor a total of \$7, or bankruptcy, did you pay any creditor a total of \$7, or more in one or moditor. Do not include payments for domestic supports, do not include payments to an attorney for this band every 3 years after that for cases filed on or after primarily consumer debts. For bankruptcy, did you pay any creditor a total of \$6, or bankruptcy, did you pay any creditors, such as chief the payments to an attorney for this bankruptcy case.	575* or more? nore payments and tobligations, such ankruptcy case. the date of adjustment. 500 or more? amount you paid that lld support and
include your relatives; any general partners; recorporations of which you are an officer, direct agent, including one for a business you operated such as child support and alimony. No. Yes. List all payments to an insider.	cy, did you make a payment on a debt you owed elatives of any general partners; partnerships of whitor, person in control, or owner of 20% or more of the te as a sole proprietor. 11 U.S.C. § 101. Include page	ich you are a general partner; neir voting securities; and any managing yments for domestic support obligations,
8. Within 1 year before you filed for bankrupt insider?Include payments on debts guaranteed or cosNo.	cy, did you make any payments or transfer any paigned by an insider.	property on account of a debt that benefited an
Yes. List all payments that benefited an in:	sider.	
Part 4: Identify Legal Actions, Repossess	sions, and Foreclosures	
9. Within 1 year before you filed for bankrupt	cy, were you a party in any lawsuit, court action	, or administrative proceeding?

List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes.

✓ No

 $\hfill \square$ Yes. Fill in the details.

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Debtor

Charles J. Uvino
First Name Middle

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Case number(if known)

10.Within 1 year before you filed for bankruptcy Check all that apply and fill in the details below.	y, was any of your property repossessed, foreclosed, garni	shed, attached, seize	d, or levied?
✓ No. Go to line 11.✓ Yes. Fill in the information below.			
11.Within 90 days before you filed for bankrupt from your accounts or refuse to make a pay	cy, did any creditor, including a bank or financial institution ment because you owed a debt?	n, set off any amount	s
✓ No ☐ Yes. Fill in the details			
12.Within 1 year before you filed for bankruptcy creditors, a court-appointed receiver, a cust	/, was any of your property in the possession of an assigne odian. or another official?	ee for the benefit of	
✓ No	,		
Yes			
Part 5: List Certain Gifts and Contributions			
13.Within 2 years before you filed for bankrupto	cy, did you give any gifts with a total value of more than \$6	00 per person?	
✓ No✓ Yes. Fill in the details for each gift.			
14.Within 2 years before you filed for bankrupto	cy, did you give any gifts or contributions with a total value	of more than \$600 to	any charity?
✓ No✓ Yes. Fill in the details for each gift or contribution	ution.		
Part 6: List Certain Losses			
45 Wishing 4 years had an account filed for handsmuster			
gambling?	y or since you filed for bankruptcy, did you lose anything b	ecause of theft, fire, o	otner disaster, or
✓ No			
Yes. Fill in the details.			
_			
Part 7: List Certain Payments or Transfers			
	y, did you or anyone else acting on your behalf pay or trans	sfer any property to	
anyone you consulted about seeking bankru	iptcy or preparing a bankruptcy petition? arers, or credit counseling agencies for services required in you	ır hankruntov	
□ No	,		
Yes. Fill in the details.			
	Description and value of any property transferred	Date payment or transfer was	Amount of payment
	Legal Fee	made 11/08/2023	\$ 2,500.00
Scura, Wigfield, Heyer, Stevens &			\$
Person Who Was Paid			
Cammarota, LLP	_		
1599 Hamburg turnpike			
Number Street			
Wayne NJ 07470	_		
City State ZIP Code jromero@scura.com	_		
Email or website address Debtor	_		
Person Who Made the Payment, if Not You			
	y, did you or anyone else acting on your behalf pay or trans	sfer any property to	
anyone who promised to help you deal with Do not include any payment or transfer that you	your creditors or to make payments to your creditors? I listed on line 16.		
✓ No			
Yes. Fill in the details.			

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Debtor

pr Inc Do	fithin 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than roperty transferred in the ordinary course of your business or financial affairs? clude both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). o not include gifts and transfers that you have already listed on this statement. No Yes. Fill in the details.
yc 🗹	Vithin 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which but are a beneficiary? (These are often called asset-protection devices.) No No. Fill in the details
۰	Yes. Fill in the details.
Part	8: List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units
cle In br	lithin 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, osed, sold, moved, or transferred? Is clude checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, rokerage houses, pension funds, cooperatives, associations, and other financial institutions.
	No Yes. Fill in the details.
se	o you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for ecurities, cash, or other valuables?
_	No Yes. Fill in the details.
⊘	ave you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy No Yes. Fill in the details.
Part	9: Identify Property You Hold or Control for Someone Else
or	o you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, r hold in trust for someone.
_	No Yes. Fill in the details.
Part	10: Give Details About Environmental Information
For t	the purpose of Part 10, the following definitions apply:
ha	nvironmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of azardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, cluding statutes or regulations controlling the cleanup of these substances, wastes, or material.
	ite means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize or used to own, operate, or utilize it, including disposal sites.
	azardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic ubstance, hazardous material, pollutant, contaminant, or similar term.
Repo	ort all notices, releases, and proceedings that you know about, regardless of when they occurred.
24.Ha	as any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?
_	No Yes. Fill in the details.
25.Ha	ave you notified any governmental unit of any release of hazardous material?
	No Yes. Fill in the details.
26.Ha	ave you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.
\equiv	No Yes. Fill in the details.

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Debtor

Part 11: Give Details About Your Business or Connections to Any Business
27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?
A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time
A member of a limited liability company (LLC) or limited liability partnership (LLP)
A partner in a partnership
An officer, director, or managing executive of a corporation
An owner of at least 5% of the voting or equity securities of a corporation
☑ No. None of the above applies. Go to Part 12.
Yes. Check all that apply above and fill in the details below for each business.
28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.
✓ No. None of the above applies. Go to Part 12.
Yes. Check all that apply above and fill in the details below for each business.

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Debtor

answers are true and correct. I understa in connection with a bankruptcy case ca	nt of Financial Affairs and any attachments, and I declare under penalty of perjury that the nd that making a false statement, concealing property, or obtaining money or property by fraud n result in fines up to \$250,000, or imprisonment for up to 20 years, or both.
18 U.S.C. §§ 152, 1341, 1519, and 3571.	
X /s/ Charles J. Uvino Signature of Debtor 1	Signature of Debtor 2
Date <u>02/20/2024</u>	Date
Did you pay or agree to pay someone wl	o is not an attorney to help you fill out bankruptcy forms?
▽ No	
Yes. Name of person	Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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Fill in this in	formation to i	dentify your case:		01 01	C
Debtor 1	Charles J. U	Jvino Middle Name	Last Name	_	A th
Debtor 2					
(Spouse, if filing) United States F		Middle Name for the: District of New Jersey	Last Name		l V
Case number	samuapity Count	or the District of New Colocy			_
(If known)					

Check as directed in lines 17 and 21:
According to the calculations required by this Statement:
1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).
2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).
□ 3. The commitment period is 3 years.☑ 4. The commitment period is 5 years.

Check if this is an amended filing

Official Form 122C-1

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

10/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Pa	rt 1: Calculate Your Average Monthly Income				
1.	What is your marital and filing status? Check one only. Not married. Fill out Column A, lines 2-11. Married. Fill out both Columns A and B, lines 2-11.				
	Fill in the average monthly income that you received from bankruptcy case. 11 U.S.C. § 101(10A). For example, if you have not include any income amount more than one from that property in one column only. If you have nothing to	ou are filing on tring the 6 month nce. For example	September 15, the ns, add the income e, if both spouses of	6-month period woul for all 6 months and own the same rental	d be March 1 through divide the total by 6. Fill in
				Column A Debtor 1	Column B Debtor 2 or non-filing spouse
2.	Your gross wages, salary, tips, bonuses, overtime, and payroll deductions).	commissions	(before all	\$9,562.51	\$8,597.51
3.	Alimony and maintenance payments. Do not include pay	ments from a sp	pouse.	\$0.00	\$0.00
4.	All amounts from any source which are regularly paid for you or your dependents, including child support. Include an unmarried partner, members of your household, your de roommates. Do not include payments from a spouse. Do not listed on line 3.	le regular contri pendents, pare	butions from nts, and	\$0.00	\$0.00
5.	Net income from operating a business, profession, or farm	Debtor 1	Debtor 2		
	Gross receipts (before all deductions)	\$0.00	\$0.00		
	Ordinary and necessary operating expenses	- \$0.00 -	\$0.00		
	Net monthly income from a business, profession, or farm	\$0.00	\$0.00 here	\$0.00	\$0.00
6.	Net income from rental and other real property	Debtor 1	Debtor 2		
	Gross receipts (before all deductions)	\$0.00	\$0.00		
	Ordinary and necessary operating expenses	- \$0.00_	\$0.00		
	Net monthly income from rental or other real property	* 0.00	Copy_	. 0.00	. 0.00

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Debtor 1

Charles J. Uvino Middle Name

Last Name

				Column Debtor		Column Debtor 2 non-filing	or	
7.	Interest, dividends, and royalties			\$	0.00	\$	0.00	
	Unemployment compensation			\$	0.00	\$	0.00	
	Do not enter the amount if you contend that the amount receithe Social Security Act. Instead, list it here:		nefit under					
	For you	\$	0.00					
	For your spouse	\$	0.00					
9.	Pension or retirement income. Do not include any amount repension or retirement income. Do not include any amount repension include any compensation, pension, pay, annuity, or allow States Government in connection with a disability, combat-redeath of a member of the uniformed services. If you received under chapter 61 of title 10, then include that pay only to the exceed the amount of retired pay to which you would otherwisunder any provision of title 10 other than chapter 61 of that title to the retirement of the pay to which you would otherwisunder any provision of title 10 other than chapter 61 of that title the pay to which you would be the pay to which you would otherwisunder any provision of title 10 other than chapter 61 of that title pays the pays that the pays the pa	in the next sen vance paid by lated injury or any retired pa extent that it d se be entitled	tence, do the United disability, or ly paid oes not	\$	0.00	\$	0.00	
10.	Income from all other sources not listed above. Specify th Do not include any benefits received under the Social Securit as a victim of a war crime, a crime against humanity, or interr terrorism; or compensation, pension, pay, annuity, or allowan States Government in connection with a disability, combat-re or death of a member of the uniformed services. If necessary separate page and put the total below.	ty Act; paymer national or don nce paid by the lated injury or	nts received nestic United disability,					
				\$	0.00	\$	0.00	
				\$	0.00	\$	0.00	
	Total amounts from separate pages, if any.			+ \$	0.00	+ \$	0.00	
11.	Calculate your total average monthly income. Add lines 2 column. Then add the total for Column A to the total for Column		each	\$	9,562.51	+ \$8	3,597.51	= \$_18,160.02 Total average monthly income
Pa	rt 2: Determine How to Measure Your Deduction	ons from Inc	ome					
12.	Copy your total average monthly income from line 11							\$18,160.02
13.	Calculate the marital adjustment. Check one:							
	☐ You are not married. Fill in 0 below.							
	☐ You are married and your spouse is filing with you. Fill in ☐ You are married and your spouse is not filing with you.	0 below.						
	Fill in the amount of the income listed in line 11, Column you or your dependents, such as payment of the spouse you or your dependents.							
	Below, specify the basis for excluding this income and th list additional adjustments on a separate page.	e amount of in	come devote	ed to ead	ch purpose. If	f necessary,		
	If this adjustment does not apply, enter 0 below.							
	NFS Debt Services			\$	887.00			
	NFS Vehicle Payment			\$	350.00			
				+ \$	0.00	-		
	Total			. \$	1,237.00	Copy here	-	1,237.00
14.	Your current monthly income. Subtract the total in line 13 f	from line 12.						\$_16,923.02

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Debtor 1

Charles J. Uvino

Last Name 15. Calculate your current monthly income for the year. Follow these steps: 16,923.02 15a. Copy line 14 here Multiply line 15a by 12 (the number of months in a year). **x** 12 \$ 203,076.24 15b. The result is your current monthly income for the year for this part of the form. 16. Calculate the median family income that applies to you. Follow these steps: NJ 16a. Fill in the state in which you live. 3 16b. Fill in the number of people in your household. 16c. Fill in the median family income for your state and size of household. 125,090.00 To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. 17. How do the lines compare? 17a. 🔲 Line 15b is less than or equal to line 16c. On the top of page 1 of this form, check box 1, Disposable income is not determined under 11 U.S.C. § 1325(b)(3). Go to Part 3. Do NOT fill out Calculation of Your Disposable Income (Official Form 122C-2). 17b. 🖊 Line 15b is more than line 16c. On the top of page 1 of this form, check box 2, Disposable income is determined under 11 U.S.C. § 1325(b)(3). Go to Part 3 and fill out Calculation of Your Disposable Income (Official Form 122C-2). On line 39 of that form, copy your current monthly income from line 14 above. Part 3: Calculate Your Commitment Period Under 11 U.S.C. § 1325(b)(4) 18. Copy your total average monthly income from line 11. 18,160.02 19. Deduct the marital adjustment if it applies. If you are married, your spouse is not filing with you, and you contend that calculating the commitment period under 11 U.S.C. § 1325(b)(4) allows you to deduct part of your spouse's income, copy the amount from line 13. 19a. If the marital adjustment does not apply, fill in 0 on line 19a. _ \$ 1,237.00 19b. Subtract line 19a from line 18. \$ 16,923.02 20. Calculate your current monthly income for the year. Follow these steps: 20a. Copy line 19b...... \$ 16,923.02 12 Multiply by 12 (the number of months in a year). X 20b. The result is your current monthly income for the year for this part of the form. \$ 203,076.24 20c. Copy the median family income for your state and size of household from line 16c....... 125,090.00 21. How do the lines compare? Line 20b is less than line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 3, The commitment period is 3 years. Go to Part 4. Line 20b is more than or equal to line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 4, The commitment period is 5 years. Go to Part 4.

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Debtor 1

Page 44 of 61 Document Charles J. Uvino Last Name

Part 4:	Sign Below	
	By signing here, under penalty of perjury I declare that the inform	nation on this statement and in any attachments is true and correct.
	✗ /s/ Charles J. Uvino	×
	Signature of Debtor 1	Signature of Debtor 2
	Date 02/20/2024 MM / DD / YYYY	Date
	If you checked 17a, do NOT fill out or file Form 122C–2. If you checked 17b, fill out Form 122C–2 and file it with this form	. On line 39 of that form, copy your current monthly income from line 14 above.

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Debtor 1 Charles J. Uvino First Name Debtor 2 (Spouse, if filling) United States Bankruptcy Court for the: District of New Jersey Case number (If known)					
First Name Middle Name Last Name Debtor 2 (Spouse, if filling) First Name Middle Name Last Name United States Bankruptcy Court for the: District of New Jersey Case number	Fill in this in	formation to ide	entify your case:		
Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: District of New Jersey Case number	Debtor 1	Charles J. U	lvino		
(Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: District of New Jersey Case number	-	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the: District of New Jersey Case number	Debtor 2				
Case number	(Spouse, if filing)	First Name	Middle Name	Last Name	
	United States E	Bankruptcy Court fo	or the: District of New Jersey		
(If known)	Case number				
	(If known)				

Official Form 122C-2

Chapter 13 Calculation of Your Disposable Income

4/22

To fill out this form, you will need your completed copy of Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period (Official Form 122C-1).

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Part 1:

Calculate Your Deductions from Your Income

The Internal Revenue Service (IRS) issues National and Local Standards for certain expense amounts. Use these amounts to answer the questions in lines 6-15. To find the IRS standards, go online using the link specified in the separate instructions for this form. This information may also be available at the bankruptcy clerk's office.

Deduct the expense amounts set out in lines 6-15 regardless of your actual expense. In later parts of the form, you will use some of your actual expenses if they are higher than the standards. Do not include any operating expenses that you subtracted from income in lines 5 and 6 of Form 122C–1, and do not deduct any amounts that you subtracted from your spouse's income in line 13 of Form 122C–1.

If your expenses differ from month to month, enter the average expense.

Note: Line numbers 1-4 are not used in this form. These numbers apply to information required by a similar form used in chapter 7 cases.

5. The number of people used in determining your deductions from income

Fill in the number of people who could be claimed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support. This number may be different from the number of people in your household.

3

National Standards You must use the IRS National Standards to answer the questions in lines 6-7.

6. **Food, clothing, and other items:** Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for food, clothing, and other items.

\$1,700.00

7. Out-of-pocket health care allowance: Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for out-of-pocket health care. The number of people is split into two categories—people who are under 65 and people who are 65 or older—because older people have a higher IRS allowance for health care costs. If your actual expenses are higher than this IRS amount, you may deduct the additional amount on line 22.

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Debtor 1

Charles J. Uvino

First Name Middle Name Last Name Case number (if known)

	People who are under 65 years of age					
	7a. Out-of-pocket health care allowance per person	\$_79.00	_			
	7b. Number of people who are under 65	x <u>3</u>				
	7c. Subtotal. Multiply line 7a by line 7b.	\$ <u>237.00</u>	Copy line 7c here	\$ 237.00		
	People who are 65 years of age or older					
	7d. Out-of-pocket health care allowance per person	\$ 154.00				
	7e. Number of people who are 65 or older	x <u>0</u>				
	7f. Subtotal. Multiply line 7d by line 7e.	\$ <u>0.00</u>	Copy line 7f here	+ \$0.00		
7g.	Total. Add lines 7c and 7f			\$ <u>237.00</u>	Copy total here →7g.	\$ <u>237.00</u>
ocal	You must use the IRS Local Standards to	answer the question	ns in lines 8-15	5.		
tanda	arus	·				
	on information from the IRS, the U.S. Trustee Proportion parts:	ogram has divided	the IRS Loca	l Standard for hou	using for bankrupto	y purposes
Hou	using and utilities – Insurance and operating expe	enses				
Hou	using and utilities – Mortgage or rent expenses					
	swer the questions in lines 8-9, use the U.S. Trust ied in the separate instructions for this form. This					
ecifi Hou		s chart may also be enses: Using the nu	e available at imber of peopl	the bankruptcy cl	erk's office.	_{\$_} 794.00
Hou the	ied in the separate instructions for this form. This using and utilities – Insurance and operating expe	s chart may also be enses: Using the nu	e available at imber of peopl	the bankruptcy cl	erk's office.	\$ <u>794.00</u>
Hou the	ied in the separate instructions for this form. This using and utilities – Insurance and operating expended amount listed for your county for insurance and	enses: Using the nu d operating expense 5, fill in the dollar am	e available at imber of peopl es.	the bankruptcy cl	erk's office.	_{\$} 794.00
Hou the Hou	ied in the separate instructions for this form. This using and utilities – Insurance and operating expended and utilities – Insurance and operating expended and utilities – Mortgage or rent expenses: 9a. Using the number of people you entered in line 5	enses: Using the number of operating expense of the fill in the dollar amonses.	e available at imber of peopl es.	the bankruptcy cl	erk's office.	\$_794.00
Hou the	ied in the separate instructions for this form. This using and utilities – Insurance and operating expensional dollar amount listed for your county for insurance and using and utilities – Mortgage or rent expenses: 9a. Using the number of people you entered in line solutions for your county for mortgage or rent expenses. 9b. Total average monthly payment for all mortgage	enses: Using the number of operating expenses 5, fill in the dollar amouses. s and other debts see, add all amounts the	e available at amber of peoples. Hount ecured by at are	the bankruptcy cl	erk's office.	\$ <u>794.00</u>
Hou the	ising and utilities – Insurance and operating experiously and utilities – Insurance and operating experiously amount listed for your county for insurance and using and utilities – Mortgage or rent expenses: 9a. Using the number of people you entered in line solution is listed for your county for mortgage or rent experiously. Total average monthly payment for all mortgage your home. To calculate the total average monthly payment contractually due to each secured creditor in the	enses: Using the number of operating expenses 5, fill in the dollar amouses. s and other debts see, add all amounts the	e available at amber of peoples. Hount ecured by at are	the bankruptcy cl	erk's office.	\$ 794.00
Hou the Hou	ising and utilities – Insurance and operating experiously and utilities – Insurance and operating experiously and utilities – Mortgage or rent expenses: 9a. Using the number of people you entered in line of listed for your county for mortgage or rent experiously. Total average monthly payment for all mortgage your home. To calculate the total average monthly payment contractually due to each secured creditor in the bankruptcy. Next divide by 60.	enses: Using the number of the second of the	e available at amber of peoples. Hount ecured by at are	the bankruptcy cl	erk's office.	\$_794.00
Hou the Hou	ising and utilities – Insurance and operating experience and utilities – Insurance and operating experience and utilities – Mortgage or rent expenses: 9a. Using the number of people you entered in line solisted for your county for mortgage or rent experience. 9b. Total average monthly payment for all mortgage your home. To calculate the total average monthly payment contractually due to each secured creditor in the bankruptcy. Next divide by 60. Name of the creditor	enses: Using the number of the second of the	e available at amber of peoples. Hount ecured by at are	the bankruptcy cl	erk's office.	\$_794.00
Hou the Hou	ising and utilities – Insurance and operating experience and utilities – Insurance and operating experience and utilities – Mortgage or rent expenses: 9a. Using the number of people you entered in line solisted for your county for mortgage or rent experience. 9b. Total average monthly payment for all mortgage your home. To calculate the total average monthly payment contractually due to each secured creditor in the bankruptcy. Next divide by 60. Name of the creditor	enses: Using the number of the second of the	e available at amber of peoples. Hount ecured by at are	the bankruptcy cl	erk's office.	\$ 794.00
Hou the Hou	ising and utilities – Insurance and operating experience and utilities – Insurance and operating experience and utilities – Mortgage or rent expenses: 9a. Using the number of people you entered in line solisted for your county for mortgage or rent experience. 9b. Total average monthly payment for all mortgage your home. To calculate the total average monthly payment contractually due to each secured creditor in the bankruptcy. Next divide by 60. Name of the creditor	enses: Using the number of operating expenses. 5, fill in the dollar ammises. s and other debts seed, add all amounts the end of operating expenses. Average monthly payment \$3,079.06 \$	e available at amber of peoples. Hount ecured by at are	the bankruptcy cl	erk's office.	*
ecifi Hou the Hou	using and utilities – Insurance and operating experience and utilities – Insurance and operating experience and utilities – Mortgage or rent expenses: 9a. Using the number of people you entered in line solisted for your county for mortgage or rent experience. 9b. Total average monthly payment for all mortgage your home. To calculate the total average monthly payment contractually due to each secured creditor in the bankruptcy. Next divide by 60. Name of the creditor NewRez LLC	s chart may also be enses: Using the number of the second	e available at imber of peoples. Hount ecured by at are u file for	the bankruptcy cless you entered in lines and the second s	erk's office. The 5, fill in Repeat this amount	*
Hou the Hou	ising and utilities – Insurance and operating experience of the separate instructions for this form. This using and utilities – Insurance and operating experience of power county for insurance and using and utilities – Mortgage or rent expenses: 9a. Using the number of people you entered in line is listed for your county for mortgage or rent experience. 9b. Total average monthly payment for all mortgage your home. To calculate the total average monthly payment contractually due to each secured creditor in the bankruptcy. Next divide by 60. Name of the creditor NewRez LLC 9b. Total average monthly payment	s chart may also be enses: Using the number of the second operating expenses of the second operation expenses of the second operatio	e available at amber of peoples. Hount ecured by at are u file for Copy line 9b here	the bankruptcy cless you entered in lines and the second s	erk's office. The 5, fill in Repeat this amount	*
Hou the Hou	ising and utilities – Insurance and operating experience of the separate instructions for this form. This using and utilities – Insurance and operating experience of power county for insurance and using and utilities – Mortgage or rent expenses: 9a. Using the number of people you entered in line is listed for your county for mortgage or rent experience. 9b. Total average monthly payment for all mortgage your home. To calculate the total average monthly payment contractually due to each secured creditor in the bankruptcy. Next divide by 60. Name of the creditor NewRez LLC 9b. Total average monthly payment	s chart may also be enses: Using the number of the IRS Local Senses: Using the number of the number of the number of the number of the IRS Local Senses: Using the number of the number	cavailable at amber of peoples. Copy line 9b here tandard for h	the bankruptcy cl e you entered in lin \$ 2,643.00 - \$ 3,079.06	Repeat this amount on line 33a. Copy 9c here	

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Debtor 1	Charles J. Uvino		Document	Page 47 of 61 Case number (if known)	
	First Name	Middle Name	Last Name		

expens			Ising the IRS Local Star Costs that apply for your				m the operating	_{\$_} 758.00
vehicle	below. Yo	u may not cla	xpense: Using the IRS I im the expense if you do more than two vehicles.	o not make any loan				
Vel	hicle 1	Describe Vehicle 1:	2018 RAM 1500	Crew				
13a	. Owners	nip or leasing	costs using IRS Local S	tandard		_{\$} 629.00		
			nent for all debts secure		13a.	φσσσσσσσσσσσσσσσσσσσσσσσσσσσσσσσσσσσσσσ		
	Do not i	nclude costs fo	or leased vehicles.					
	add all a	mounts that a	ge monthly payment he re contractually due to o ths after you file for ban	each secured				
	Name (of each creditor	for Vehicle 1	Average monthly payment				
			Ally Financial	\$ <u>423.16</u>				
				+ \$ 0.00				
		Total aver	rage monthly payment	\$_423.16	Copy here	- \$ 423.16	Repeat this amount on line 33b.	
13c			ip or lease expense line 13a. If this number	is less than \$0, enter	r \$0	\$ 205.84	Copy net Vehicle 1 expense here	<u>\$</u> 205.84
Vel	hicle 2	Describe Vehicle 2:						
13d	. Ownersh	nip or leasing	costs using IRS Local S	tandard		_{\$_629.00}		
13e	•		nent for all debts secure or leased vehicles.	ed by Vehicle 2.				
	Name	of each creditor	r for Vehicle 2	Average monthly payment				
				\$ 0.00				
				+ \$ 0.00				
				<u> </u>				
		Total ave	erage monthly payment		Copy here	<u> </u>	Repeat this amount on line 33c.	
13f.		cle 2 ownersh	erage monthly payment hip or lease expense 13d. If this number is le	\$_0.00	here →	¢0.00		\$ <u>0.00</u>

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Charles J. Uvino

Debtor 1 Case number (if known) Middle Name Last Name In addition to the expense deductions listed above, you are allowed your monthly expenses for the Other Necessary **Expenses** following IRS categories. 16. Taxes: The total monthly amount that you actually pay for federal, state and local taxes, such as income taxes, selfemployment taxes, social security taxes, and Medicare taxes. You may include the monthly amount withheld from your pay for these taxes. However, if you expect to receive a tax refund, you must divide the expected refund by 12 \$3,156.11 and subtract that number from the total monthly amount that is withheld to pay for taxes. Do not include real estate, sales, or use taxes. 17. **Involuntary deductions:** The total monthly payroll deductions that your job requires, such as retirement contributions. union dues, and uniform costs. \$698.27 Do not include amounts that are not required by your job, such as voluntary 401(k) contributions or payroll savings. 18. Life insurance: The total monthly premiums that you pay for your own term life insurance. If two married people are filing together, include payments that you make for your spouse's term life insurance. Do not include premiums for life insurance on your dependents, for a non-filing spouse's life insurance, or for any form of life \$93.15 insurance other than term. 19. Court-ordered payments: The total monthly amount that you pay as required by the order of a court or administrative \$1,318.00 agency, such as spousal or child support payments. Do not include payments on past due obligations for spousal or child support. You will list these obligations in line 35. 20. Education: The total monthly amount that you pay for education that is either required: ■ as a condition for your job, or \$ 0.00 ■ for your physically or mentally challenged dependent child if no public education is available for similar services. 21. Childcare: The total monthly amount that you pay for childcare, such as babysitting, daycare, nursery, and preschool. Do not include payments for any elementary or secondary school education. \$ 0.00 22. Additional health care expenses, excluding insurance costs: The monthly amount that you pay for health care that is required for the health and welfare of you or your dependents and that is not reimbursed by insurance or paid by a health savings account. Include only the amount that is more than the total entered in line 7. \$0.00 Payments for health insurance or health savings accounts should be listed only in line 25. 23. Optional telephones and telephone services: The total monthly amount that you pay for telecommunication services for you and your dependents, such as pagers, call waiting, caller identification, special long distance, or business cell phone service, to the extent necessary for your health and welfare or that of your dependents or for the production of income, if it is not reimbursed by your employer. + \$0.00 Do not include payments for basic home telephone, internet or cell phone service. Do not include self-employment expenses, such as those reported on line 5 of Form 22C-1, or any amount you previously deducted. 24. Add all of the expenses allowed under the IRS expense allowances. \$8,960.36 Add lines 6 through 23. **Additional Expense** These are additional deductions allowed by the Means Test. **Deductions** Note: Do not include any expense allowances listed in lines 6-24. 25. Health insurance, disability insurance, and health savings account expenses. The monthly expenses for health insurance, disability insurance, and health savings accounts that are reasonably necessary for yourself, your spouse, or your dependents. \$568.02 Health insurance \$0.00 Disability insurance Health savings account \$0.00 \$568.02 Copy total here \$568.02 Total Do you actually spend this total amount? ☐ No. How much do you actually spend? ✓ Yes 26. Continuing contributions to the care of household or family members. The actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your \$ 0.00 household or member of your immediate family who is unable to pay for such expenses. These expenses may include contributions to an account of a qualified ABLE program. 26 U.S.C. § 529A(b). 27. Protection against family violence. The reasonably necessary monthly expenses that you incur to maintain the safety of \$0.00 you and your family under the Family Violence Prevention and Services Act or other federal laws that apply.

By law, the court must keep the nature of these expenses confidential.

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Charles J. Uvino

First Name Middle Name Last Name Case number (if known)

	Additional home energy costs. Your ho on line 8. If you believe that you have home energy housing and utilities allowance, then fill in You must give your case trustee docume claimed is reasonable and necessary.	rtgage	\$ <u>0.00</u>			
29.	Education expenses for dependent ch per child) that you pay for your dependen elementary or secondary school. You must give your case trustee docume reasonable and necessary and not alread		\$0.00			
	* Subject to adjustment on 4/01/22, and	every 3 years after that for cases b	begun on or after	the date of adjustme	ent.	
30. Additional food and clothing expense. The monthly amount by which your actual food and clothing expenses are higher than the combined food and clothing allowances in the IRS National Standards. That amount cannot be more than 5% of the food and clothing allowances in the IRS National Standards. To find a chart showing the maximum additional allowance, go online using the link specified in the separate instructions for this form. This chart may also be available at the bankruptcy clerk's office. You must show that the additional amount claimed is reasonable and necessary.						\$ <u>57.00</u>
	instruments to a religious or charitable organization. 11 U.S.C. § 548(d)3 and (4). Do not include any amount more than 15% of your gross monthly income.					
32. Add all of the additional expense deductions. Add lines 25 through 31.						\$ <u>625.02</u>
De	ductions for Debt Payment					
33.	For debts that are secured by an intervehicle loans, and other secured debt,		luding home mo	ortgages,		
	To calculate the total average monthly pa secured creditor in the 60 months after ye			each each		
				Average monthly payment		
	Mortgages on your home			payment		
	33a. Copy line 9b here			\$ 3,079.06		
	Loans on your first two vehicles					
	33b. Copy line 13b here			\$ 423.16		
	33c. Copy line 13e here			\$ 0.00		
	33d. List other secured debts:					
	Name of each creditor for other secured debt	Identify property that secures the debt	Does payment include taxes or insurance?			
			□No □Yes	\$_0.00		
			□No □Yes	\$0.00		
			□No □Yes	+ \$ 0.00	-	
	33e. Total average monthly payment.	Add lines 33a through 33d		\$3,502.22	Copy total here	\$ <u>3,502.22</u>

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Dobtor	1

manes o. c	JVIIIU	
First Name	Middle Name	Lact Namo

Case number (if known)_

34.		debts that you listed in line 3 oport or the support of your c	3 secured by your primary resi dependents?	idence, a vehicle,	or oth	er property neces	sary for	
	Tyes.		st pay to a creditor, in addition to amount). Next, divide by 60 and f				ession of	
		Name of the creditor	Identify property that secures the debt	Total cure amount		Monthly cure amo	unt	
				\$	÷ 60 =	= \$	_	
				\$	÷ 60 =	= \$	_	
				\$	÷ 60 =	= + \$	_	
					Tota	al \$0.00	Cop tota here	aí <u>\$</u> 0.00
35.		owe any priority claims—sucl te of your bankruptcy case?	h as a priority tax, child suppor 11 U.S.C. § 507.	rt, or alimony— th	nat are	past due as of the	•	
	✓ Yes.	Go to line 36. Fill in the total amount of all of priority claims, such as those y	these priority claims. Do not incluou listed in line 19.	ude current or ong	oing			
		Total amount of all past-due p	priority claims		. :	\$29,742.00	÷ 60	<u>\$495.70</u>
36.	Projecte	d monthly Chapter 13 plan p	ayment		;	\$_700.00		
	of the Un Executive To find a	ited States Courts (for districts e Office for United States Truste list of district multipliers that inc parate instructions for this form.	ed on the list issued by the Admi in Alabama and North Carolina) ees (for all other districts). cludes your district, go online usin . This list may also be available a	or by the ng the link specifie	d X	10.0%		
	Average	monthly administrative expense	9			\$_70.00	Copy total here	\$ <u>70.00</u>
37.	Add all o	of the deductions for debt pay	yment. Add lines 33e through 36					\$4,067.92
To	otal Deduc	ctions from Income						
38.	Add all c	of the allowed deductions.						
	Copy line	24, All of the expenses allowe	d under IRS expense allowances	S	;	\$ 8,960.36		
	Copy line	32, All of the additional expens	se deductions		;	\$ <u>625.02</u>		
	Copy line	37, All of the deductions for de	ebt payment		+ :	\$_4,067.92	_	
	Total ded	luctions				\$ 13,653.30	Copy total here ->	\$ <u>13,653.30</u>
							_	

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Debtor 1

Charles J. Uvino

Middle Name Last Name Case number (if known)

ar	t 2: Determ	nine You	r Disposable Income Under 11 U	.S.C. § 1325(b)(2)			
39.			t monthly income from line 14 of Form rent Monthly Income and Calculation				_{\$16,923.0}
40.	Fill in any reasonably necessary income you receive for support for dependent children. The monthly average of any child support payments, foster care payments, or disability payments for a dependent child, reported in Part I of Form 122C-1, that you received in accordance with applicable nonbankruptcy law to the extent reasonably necessary to be expended for such child.						
41.	Fill in all qualified retirement deductions. The monthly total of all amounts that your employer withheld from wages as contributions for qualified retirement plans, as specified in 11 U.S.C. § 541(b)(7) plus all required repayments of loans from retirement plans, as specified in 11 U.S.C. § 362(b)(19).						
42.	Total of all deductions allowed under 11 U.S.C. § 707(b)(2)(A). Copy line 38 here \$ 13,653.30						
43.	expenses and their expenses	you have s. You mus	circumstances. If special circumstances no reasonable alternative, describe the st give your case trustee a detailed explamentation for the expenses.	special circumstances ar	nd		
	Describe the sp	oecial circu	mstances	Amount of expense			
	Non-Fili	ing Spou	use Vehicle Payment	\$ <u>350.00</u>			
	Non-Fili	ing Spol	use Debt Services	_{\$} 887.00			
				+\$			
			Total	\$ <u>1,237.00</u>	• + \$	237.00	
44.	Total adjustm	ients. Add	lines 40 through 43		→ \$ <u>14</u> ,	921.86 Copy total	- \$ <u>14,921.86</u>
45.	Calculate you	ır monthly	v disposable income under § 1325(b)(2). Subtract line 44 from	line 39.		\$ <u>2,001.16</u>
Pa	rt 3: Ch	ange in l	Income or Expenses				
46.	have changed the time your cafter you filed	or are virt case will be your petition	xpenses. If the income in Form 122C-1 ually certain to change after the date you e open, fill in the information below. For on, check 22C-1 in the first column, ente in when the increase occurred, and fill in	u filed your bankruptcy pexample, if the wages re r line 2 in the second col	etition and durir ported increase lumn, explain w	ng ed	
	Form	Line	Reason for change	Date of change	Increase or decrease?	Amount of chang	е
	22C-1 22C-2				Increase Decrease	\$	
	22C—1 22C—2				Increase Decrease	\$	
	22C-1 22C-2				Increase Decrease	\$	
	22C-1 22C-2				Increase Decrease	\$	

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Part 4:	Sign Below	
By signing he	ere, under penalty of perjury you declare	that the information on this statement and in any attachments is true and correct.
★ /s/ Cha	ırles J. Uvino	x
Signature of	of Debtor 1	Signature of Debtor 2
	20/2024 DD / YYYY	Date

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Ally Financial Po Box 380901 Minneapolis, MN 55438

Bank of Missouri / Continental Finance Po Box 11743 Wilmington, DE 19850

Bauer & Karch Law Group LLC 27 Main Street Lebanon, NJ 08833

Best Egg Po Box 42912 Philadelphia, PA 19101

Capital One Financial Corp 11013 W Broad Street Glen Allen, VA 23060

Citibank CBNA Po Box 6497 Sioux Falls, SD 57117

Credit One Bank PO Box 98873 Las Vegas, NV 89193

Credit One Bank Po Box 98875 Las Vegas, NV 89193

Discover Financial Services Pob 15316 Wilmington, DE 19850

Internal Revenue Service P.O. Box 7346 Philadelphia, PA 19101

Kohl's / Capital One Po Box 3115 Milwaukee, WI 53201

NewRez LLC c/o Shellpoint Mortgage Servicing P.O. Box 650840 Dallas, TX 75265 PNC Financial Services P.O.Box 500 Portage, MI 49081

Ronda Casson Cotroneo Esq. 1599 Hamburg Tpke Wayne, NJ 07470

State of New Jersey, Division of Taxation Compliance and Enforcement - Bankruptcy 3 John Fitch Way, 5th Floor, Po box 245 Trenton, NJ 08695

Suzanne H. Uvino Po Box 551 Jacksonville, VT 05342

Synchrony Bank/P.C. Richard & Son P O Box 276 Dayton, OH 45401

The Home Depot/Citibank N.A. Po Box 9714 Gray, TN 37615

United States Bankruptcy Court District of New Jersey

In re: Charles J. Uvino	Case No.	
Debtor(s)	Chapter	13

Verification of Creditor Matrix

The above-named Debtor(s) hereby verify that the attached list of creditors is true and correct to the best of their knowledge.

Date:	02/20/2024	/s/ Charles J. Uvino
		Signature of Debtor
		Signature of Joint Debtor

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11— Reorganization
- Chapter 12— Voluntary repayment plan for family farmers or fishermen
- Chapter 13— Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$78	administrative fee

total fee

\$15

\$338

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

trustee surcharge

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law.

Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form—sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

	\$1,167	filing fee
+	\$571	administrative fee
	\$1,738	total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$78	administrative fee
	\$278	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$78	administrative fee
	\$313	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes,
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/forms/bankruptcy-forms

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition* for *Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://www.uscourts.gov/services-forms/bankruptcy/credit-counseling-and-debtor-education-courses.

In Alabama and North Carolina, go to: http://www.uscourts.gov/servicesforms/bankruptcy/credit-counseling-anddebtor-education-courses.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

UNITED STATES BANKRUPTCY COURT DISTRICT OF NEW JERSEY		
Caption in Compliance with D.N.J. LBR 9004-1(b)		
Scura Wigfield, Heyer, Stevens & Cammarota LLP 1599 Hamburg Turnpike Wayne, NJ 07470 973-696-8391 jromero@scura.com		
In Re:	Case No.:	
	Chapter:	13
Charles J. Uvino	_	13
	Judge:	
1. Pursuant to 11 U.S.C. § 329(a) and Fed. R. Bank the debtor(s) and that compensation was paid to me within agreed to be paid to me, for services rendered or to be remains this bankruptcy case is as follows: ☐ Under D.N.J. LBR 2016-5(b), I have agreed to a plan, subject to the exclusions listed below, incompost postconfirmation, a flat fee in the amount of \$ demonstrate that additional services were unforced if I seek additional compensation and reimbursers.	n one year before the ndered on behalf of the accept for all legal solutions administrative I seeable at the time of neets of necessary exp	filed date of the petition, or the debtor(s) in connection services required to confirm services that may occur understand that I must the filing of this disclosure benses.
fee:	ion with the following	g are not included in the mat
Representation of the debtor in: adversary proceedings, loss mitigation/loan modification eff post-confirmation filings and matters		Court.
I have received:	\$	
The balance due is:	\$	
The balance □ will □ will not be paid the	rough the plan.	

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	the debtor in this c	BR 2016-5(c), I have agreed to ase, an hourly fee of \$39 m that may provide services to . I understand that I must	5.00 . The hourly fee this client range from \$	charged by other 195.00 to
	· 	d to me in this case post petition	* *	•
	I have reco	eived:	\$ <u>2,500.0</u>	0
2.	The source of the	funds paid to me was:		
	☑ Debtor(s)	☐ Other (specify below)		
3.	If a balance is due. ☑ Debtor(s)	the source of future compensa Other (specify below)	tion to be paid to me is:	
my law 5. counse coverag	rs of my law firm. It firm, a copy of that (a) The Debtor(s) at retained by Debtor ge counsel for any h	re not agreed to share compensate of I have agreed to share compensate agreement and a list of the people of the p	nsation with a person(s) whople sharing in the compen y appear at hearings on the tor's counsel will advise D bebtor(s) acknowledge that	no is not a member of sation is attached. ir behalf in lieu of ebtor(s) of the use of coverage counsel
		/s/ CU		
		Debtor(s) Initials	Debtor(s) Initials	
	counsel retained by	DO NOT agree that coverage condensed attorney, or members of my	arances related to the Debt	~
		Debtor(s) Initials	Debtor(s) Initials	

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The Debtor(s) have reviewed this Disclosure and it is consistent with the terms of the Retainer

6.

Agre	ement.	
Date:	02/20/2024	/s/ Charles J. Uvino Debtor
Date:	02/20/2024	Joint Debtor
Date:	02/20/2024	/s/ Jamal Romero, 231232020 Debtor's attorney